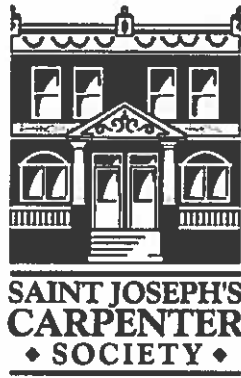


Solicitud Para la Compra de Una Casa



LAS INSTRUCCIONES PARA COMPLETAR LA SOLICITUD

- PAGINAS 2-4: Información de Solicitante(s)
- PAGINAS 5: Horario de las Clases de Educación para Compradores de Vivienda
- PAGINAS 6: Lista de Documentos
- PAGINAS 7: Questionario de Finanzas (CFPBN)
- PAGINAS 8-20: Formulario de Autorización de Crédito y Declaración de Divulgación para Clientes de SJCS (Firma Requerida)
-

Una vez que haya completado la solicitud:

1. Por favor devuelva la aplicación a nuestra oficina con su pago para las clases que incluye los materiales para las clases y el reporte de crédito. **Asegúrese que el formulario de autorización de crédito (página 7) esté llenado, firmado, y con fecha.** Reporte de crédito requiere una copia de su identificación con foto y su tarjeta de Seguro Social.
 - Un Solicitante - \$55
 - Dos Solicitantes - \$80
2. Una vez que haya pagado se le dará la fecha de inicio de las clases.
3. Cuando haya comenzado las clases por favor llame a la oficina para hacer una cita con el asesor de vivienda.

Número de Cliente: _____



**SAINT JOSEPH'S
CARPENTER
SOCIETY**

La Información del Solicitante

Notas:

Nivel de educación

Por favor marque
respuesta apropiada:

- Algo de preparatoria
 Preparatoria/ GED
 Algo de universidad
 Educación técnica
 Universidad/Licenciatura
 Maestría

Fecha: _____

Solicitante: Primer Nombre Apellido Fecha de Nacimiento

Co-Solicitante: Primer Nombre Apellido Fecha de Nacimiento

Dirección

Ciudad Estado Código Postal

Teléfono de Casa

Teléfono del Trabajo

Teléfono Celular

Idioma Preferido

Correo Electrónico

¿Cuánto tiempo ha vivido en su dirección actual? _____

Dirección Anterior

Ciudad Estado Código Postal

¿Cuánto tiempo vivió en su dirección anterior? _____

Número de Seguro Social del Solicitante

Número de Seguro Social del Co-Solicitante

Eres Hispano (circule uno): SI NO

Eres un veterano (circule uno): SI NO

Información del Jefe del Hogar - Por favor circule uno para cada una de las categorías

Estado Civil	Raza	Etnicidad	Tipo de Referencia
Casado	Afroamericano		Cartelera
Divorciado	Islas del Pacifico	Hispano	Entrada
Separado	Caucásico		Banco/Corredor
Soltero	Indio Americano	No Hispano	Familia/Amigo
Viuda	Asiático		Agencia:

Información para todos los demás miembros de la familia:

Nombre	Fecha de Nacimiento	Número de Seguro Social

20 Church Street ♦ Camden, New Jersey 08105 ♦ 856-966-8117 ♦ FAX 856-342-7289

Redificando Nuestro Vecindario—Casa por Casa, Familia por Familia

PROGRAMA DE EDUCACION PARA COMPRADORES DE VIVIENDA

Se requiere que aquellos solicitantes que desean comprar una casa de la Sociedad Carpintero de San José completen el programa de Educación para Compradores de Vivienda.

El programa consiste de 2 series, Bienestar Financiero y Educación para Compradores de Vivienda. Cada serie es de 4 clases, 2 horas cada una, para un total de 16 horas en total. Las clases se ofrecen en Inglés y Español; horarios están indicados abajo.

Aquellos que quieren comprar una casa por su cuenta o a través de otra agencia, se requiere que completen el programa de Educación para Compradores de Vivienda.

El programa está aprobado por HUD y aceptado por las instituciones financieras y organismos de gobierno local. Usted recibirá la certificación al terminar del programa.

Las tarifas para este programa de educación:

- **Una Persona**
 - Bienestar Financiero y Educación para Compradores de Vivienda - \$55
- **Dos Personas**
 - Bienestar Financiero y Educación para Compradores de Vivienda - \$80

La tarifa cubre los costos de un informe de crédito y el libro utilizado en clase.

Tiene que pagar por las clases antes del inicio de cualquier serie de clases. Los pagos deben hacerse en efectivo o giro postal; no se aceptan otras formas de pago. Para registrarse y pagar por las clases apropiadas por favor venga a nuestra oficina durante las horas normales de trabajo: de Lunes a Viernes, de 9:00 am a 5:00 pm. Las clases también se pueden pagar a través de PayPal, visite: http://www.sjscamden.org/homeowner_academy.html

Location: St. Joseph's Carpenter Society
20 Church Street
Camden, NJ 08105
Teléfono: 856-966-8117

Clases en Ingles

- Martes desde 6:00 a 8:00 PM Bienestar Financiero
- Jueves desde 6:00 a 8:00 PM Educación para Compradores de Vivienda

Clases en Español

- Lunes desde 6:00 a 8:00 PM Bienestar Financiero
- Miércoles desde 6:00 a 8:00 PM Educación para Compradores de Vivienda

Las clases están disponibles en el internet. Para más información, visite: <http://www.ehomeamerica.org/sjcs>

Si usted tiene alguna pregunta por favor póngase en contacto con Jim Roche al 856-966-8117, extensión 232.

20 Church Street ♦ Camden, New Jersey 08105 ♦ 856-966-8117 ♦ FAX 856-342-7289

Redificando Nuestro Vecindario—Casa por Casa, Familia por Familia



Questionnaire

NAME OR NUMBER _____

Part 1: How well does this statement describe you or your situation?

This statement describes me	Completely	Very well	Somewhat	Very little	Not at all
1. I could handle a major unexpected expense	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I am securing my financial future	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Because of my money situation, I feel like I will never have the things I want in life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I can enjoy life because of the way I'm managing my money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I am just getting by financially	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I am concerned that the money I have or will save won't last	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part 2: How often does this statement apply to you?

This statement applies to me	Always	Often	Sometimes	Rarely	Never
7. Giving a gift for a wedding, birthday or other occasion would put a strain on my finances for the month	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I have money left over at the end of the month	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I am behind with my finances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. My finances control my life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part 3: Tell us about yourself.

11. How old are you?	<input type="checkbox"/> 18-61	<input type="checkbox"/> 62+
12. How did you take the questionnaire?	<input type="checkbox"/> I read the questions	<input type="checkbox"/> Someone read the questions to me

SAINT JOSEPH'S CARPENTER SOCIETY

Client Disclosures and Authorizations

6/19/2017



Client Number: _____

NOTE: If you have an impairment, disability, language barrier, or otherwise require an alternative means of completing this form or accessing information about housing counseling, please talk to your housing counselor about arranging alternative accommodations.

About Us and Program Purpose: Saint Joseph's Carpenter Society (SJCS) is a nonprofit, HUD-approved housing counseling agency. We provide education workshops and a housing counseling including pre-purchase and non-delinquency post-purchase. We serve all clients regardless of income, race, color, religion/creed, sex, national origin, age, family status, disability, or sexual orientation/gender identity. We administer our programs in conformity with local, state, and federal anti-discrimination laws, including the federal Fair Housing Act (42 USC 3600, et seq.).

As a housing counseling program participant, please affirm your roles and responsibilities along with the following disclosures and initial each page and, sign, and date the final page.

Client and Counselor Roles and Responsibilities:

Counselor's Roles and Responsibilities	Client's Roles and Responsibilities
Reviewing your housing goal and your finances; which include your income, debts, assets, and credit history.	Completing the steps assigned to you in your Client Action Plan.
Preparing a Client Action Plan that lists the steps that you and your counselor will take in order to achieve your housing goal.	Providing accurate information about your income, debts, expenses, credit, and employment.
Preparing a household budget that will help you manage your debt, expenses, and savings.	Attending meetings, returning calls, providing requested paperwork in a timely manner.
Your counselor is not responsible for achieving your housing goal, but will provide guidance and education in support of your goal.	Notifying SJCS or your counselor when changing housing goal.
SJCS employees, volunteers, agents, or directors may not provide legal advice.	Attending educational workshop(s) (i.e. pre-purchase counseling workshop) as recommended.
	Retaining an attorney if seeking legal advice and/or representation in matters such as foreclosure or bankruptcy protection.

Termination of Services: Failure to work cooperatively with your housing counselor and/or SJCS with result in the discontinuation of counseling services. This includes, but is not limited to, missing three consecutive appointments.

Agency Conduct: No SJCS employee, officer, director, contractor, volunteer, or agent shall undertake any action that might result in, or create the appearance of, administering counseling operations for personal or private gain,

_____/____ Client Initials



Client Number: _____

NOTE: If you have an impairment, disability, language barrier, or otherwise require an alternative means of completing this form or accessing information about housing counseling, please talk to your housing counselor about arranging alternative accommodations.

provide preferential treatment for any person or organization, or engage in conduct that will compromise our agency's compliance with federal regulations and our commitment to serving the best interests of our clients.

Agency Relationships: St. Joseph's Carpenter Society is a nonprofit organization with a mission to improve the quality of life of the people of the City of Camden and its surrounding communities by promoting affordable housing and neighborhood development. Through our initiatives, we encourage people to take charge of their lives and become active community members. To meet our mission, we offer the following products and services (if funding is available):

- Home Improvement Grant Program (*myHome*);
- Pre-Purchase Homebuyer Education workshops;
- Pre-Purchase One-on-One counseling;
- Home Maintenance Training program;
- Post- Purchase workshops;
- Lead Paint Remediation Grants;
- Façade Improvement;
- Units for Rent;
- Homes for Sale.

These products are available to any client that requests it; however, we do not steer or expect any of our clients to utilize these products beyond their initial service.

Saint Joseph's Carpenter Society has financial affiliation or professional affiliations with Bank of America Charitable Foundation, Campbell Soup Foundation, Citizens Bank Foundation, City of Camden HOME Program, Housing and Community Development Network of New Jersey, Cooper Hospital Foundation , Haines Family Foundation, Investor Savings Bank Charitable Foundation, M & T Bank, M & T Bank Charitable Foundation, NeighborWorks America, New Jersey Department of Community Affairs, New Jersey Housing and Mortgage Finance Agency, PNC Foundation, William G Rohrer Charitable Foundation, ROMA Bank Community Foundation, Santander Bank Foundation, the Taylor Family Foundation, The United States Department of Housing and Urban Development (HUD), Wells Fargo Foundation, Wells Fargo Regional Foundation, and W.W. Smith Charitable Trust .

As a housing counseling program participant, you are not obligated to use the products and services of St. Joseph's Carpenter Society or our industry partners.

____/____ Client Initials



Client Number: _____

NOTE: If you have an impairment, disability, language barrier, or otherwise require an alternative means of completing this form or accessing information about housing counseling, please talk to your housing counselor about arranging alternative accommodations.

Alternative Services, Programs, and Products & Client Freedom of Choice: SJCS has a first-time homebuyer program. However, you are not obligated to participate in this or other SJCS programs and services while you are receiving housing counseling from our agency. You may consider seeking alternative products and services from entities including the Federal Housing Administration (FHA) for first-time homebuyer loan programs, Parkside Business & Community in Partnership 1487 Kenwood Ave, Camden, 08103 (856) 964-0440, for-sale housing, pre-purchase counseling, homebuyer education workshops and Neighborhood Housing Services of Camden, Inc., 601 - 603 Clinton Street Camden, NJ 08103, (856) 541-0720, Fair Housing Pre-Purchase Education Workshops, Financial Management/Budget Counseling, Home Improvement and Rehabilitation Counseling, Mortgage Delinquency and Default Resolution Counseling, Non-Delinquency Post Purchase Workshops, Pre-purchase Counseling, Pre-purchase Homebuyer Education Workshops, Predatory Lending Education Workshops. **You are entitled to choose whatever real estate professionals, lenders, and lending products that best meet your needs.**

Referrals and Community Resources: You will be provided a community resource list which outlines the county and regional services available to meet a variety of needs, including utilities assistance, emergency shelter, transitional housing, food banks, and legal aid assistance. This list also identifies alternative agencies that provide services, programs, or products identical to those offered by SJCS and its exclusive partners and affiliates.

Errors and Omissions and Disclaimer of Liability: I/we agree SJCS, its employees, agents, and directors are not liable for any claims and causes of action arising from errors or omissions by such parties, or related to my participation in SJCS counseling; and I hereby release and waive all claims of action against SJCS and its affiliates. I have read this document, understand that I have given up substantial rights by signing it, and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law. If any provision of this document is unenforceable, it shall be modified to the extent necessary to make the provision valid and binding, and the remainder of this document shall remain enforceable to the full extent allowed by law.

Quality Assurance: In order to assess client satisfaction and in compliance with grant funding requirements, SJCS, or one of its partners, may contact you during or after the completion of your housing counseling service. You may be requested to complete a survey asking you to evaluate your client experience. Your survey data may be confidentially shared with SJCS grantors such as HUD or NeighborWorks America. I/we acknowledge that I/we received, reviewed, and agree to SJCS's Program Disclosures

_____/____ Client Initials



Client Number: _____

NOTE: If you have an impairment, disability, language barrier, or otherwise require an alternative means of completing this form or accessing information about housing counseling, please talk to your housing counselor about arranging alternative accommodations.

Client Statement

I have read the disclosure statements on pages 2-4, and understand that I am under no obligation or steered toward using any of the mentioned products or services beyond my initial service provided by Saint Joseph's Carpenter Society.

Client Signature Date

Client Signature Date



Client Number: _____

NOTE: If you have an impairment, disability, language barrier, or otherwise require an alternative means of completing this form or accessing information about housing counseling, please talk to your housing counselor about arranging alternative accommodations.

Privacy Policy and Practices of St. Joseph's Carpenter Society

SJCS respects your privacy. We know it is important to keep your non-public personal information confidential. You have our assurance that SJCS will do our best to handle your non-public personal information (defined below) with discretion and care.

SJCS is committed to keeping your information secure. SJCS restricts access to non-public personal information about you to those employees who need to know that information to provide services to you. Non-public personal information is information about you not known publicly that we obtain in connection with providing affordable housing services to you (such as your social security number or credit history). Non-public personal information does not include information available from public sources, such as telephone directories or government records. Once any and all amassed documents with non-public personal information are not needed any longer or are deemed unnecessary, these documents are to be destroyed appropriately.

Information we collect

To assist you in obtaining affordable housing, SJCS collects and uses publicly available information as well as non-public personal information. We collect non-public personal information about you from the following sources:

- Information we receive from you on applications or other forms;
- Information about your transactions with us, our affiliates or others;
- Information we receive during personal interviews;
- Information we receive from personal and employment references;
- Information we receive from personal documents such as a social security card, driver's license, government identification, court order or decree, tax return, W-2, 1099 or pay-stub; and
- Information we receive from a consumer reporting agency.

Information we disclose

We may disclose the following kinds of personal information about you:

- Information we received from you on applications or other forms, such as your name, address, social security number, employer, occupation, assets, debts and income;
- Information about your transactions with us, our affiliates or others, such as your account balance, payment history and parties to your transactions; and
- Information we receive from a consumer reporting agency, such as your credit bureau reports, your credit history and your creditworthiness.

_____/____ Client Initials



Client Number: _____

NOTE: If you have an impairment, disability, language barrier, or otherwise require an alternative means of completing this form or accessing information about housing counseling, please talk to your housing counselor about arranging alternative accommodations.

To Whom Do We Disclose

We may disclose your personal information to the following types of unaffiliated third parties:

- Financial service providers, such as companies engaged in providing home mortgages; and
- Others, such as nonprofit organizations involved in community development, but only for review, auditing, research and oversight purposes.
- US Department of Housing and Urban Development (HUD)
- NeighborWorks America

If you prefer that we not disclose personal information about you to unaffiliated third parties, you may opt out of those disclosures, that is, you may direct us not to make those disclosures (other than disclosures permitted by law). A Privacy Choices Form will be provided to you to opt out upon receipt of written request. Please send request to:

St. Joseph's Carpenter Society
20 Church Street
Camden, NJ 08105
ATTN: Director of Counseling

We may also disclose personal information about you to third parties as permitted by law. *Prior to sharing personal information with unaffiliated third parties, except as described in this policy, we will give you an opportunity to direct that such information not be disclosed.*

Confidentiality and Security

We restrict access to personal information about you to those of our employees who need to know that information to provide products and services to you and to help them do their jobs. We maintain physical and electronic security procedures to safeguard the confidentiality and integrity of personal information in our possession and to guard against unauthorized access. We use locked files, user authentication and detection software to protect your information. Our safeguards comply with federal regulations to guard your personal information.

I/we acknowledge the receipt of a copy of the Privacy Policy and Practices (pages 6 – 7) of St. Joseph's Carpenter Society.

Client Signature Date

Client Signature Date



Client Number: _____

NOTE: If you have an impairment, disability, language barrier, or otherwise require an alternative means of completing this form or accessing information about housing counseling, please talk to your housing counselor about arranging alternative accommodations.

Privacy Choices Form

OPT-OUT: I request that SJCS make no disclosures of my nonpublic personal information to third parties other than project partners and those permitted by law. By choosing this option, I understand that SJCS will NOT be able to answer any questions from my creditors. I understand that I may change my decision any time by contacting SJCS.

Name: _____

Signature: _____

Address: _____

City: _____ State: _____ Zip Code: _____

RELEASE: I hereby authorize SJCS to release nonpublic personal information it obtains about me to my creditors and any third parties necessary to provide me with the services I requested. I acknowledge that I have read and understand the above privacy practices and disclosures.

Name: _____

Signature: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Please allow approximately 30 days from our receipt of your Privacy Choices Form for it to become effective. Your privacy instructions and any previous privacy instructions will remain in effect until you request a change.



Client Number: _____

NOTE: If you have an impairment, disability, language barrier, or otherwise require an alternative means of completing this form or accessing information about housing counseling, please talk to your housing counselor about arranging alternative accommodations.

**St. Joseph's Carpenter Society
20 Church Street
Camden, NJ 08105
Referral Housing Counseling**

1. Jersey Counseling and Housing Development
1844 S Broadway Camden NJ 08104
Ph: 856-541-1000 Website: Na
Fair Housing Pre-Purchase Education Workshops
Financial Management/Budget Counseling
Mortgage Delinquency and Default Resolution Counseling
Non-Delinquency Post Purchase Workshops
Pre-purchase counseling
Pre-Purchase Homebuyer Education Workshops
Rental Housing Counseling

2. Neighborhood Housing Services of Camden
601-603 Clinton Street Camden NJ 08103
Ph: 856-541-8440 Website: nhscamden@comcast.org
Fair Housing Pre-Purchase Education Workshops
Financial Management Budget Counseling
Home Improvement and Rehabilitation Counseling
Mortgage Delinquency and Default Resolution Counseling
Non-Delinquency Post Purchase Workshops
Pre-Purchase Counseling
Pre-Purchase Homebuyer Education Workshops
Predatory Lending Workshops

3. Parkside Business And Community in Partnership INC
1487 Kenwood Avenue Camden New Jersey 08103
Ph: 856-964-0440-15 Website: www.pbcip.org/what_to_expect.html
Financial Management/Budget Counseling
Pre-Purchase Counseling
Pre-Purchase Homebuyer Education Workshops

Other Housing Counseling Services Maybe looked up at:
https://www.hud.gov/offices/hsg/sfh/hcc/hcs_print.cfm?webListAction=search&searchstate=NJ

Saint Joseph Carpenter Society
PROJECT REINVEST: FINANCIAL CAPABILITY

Saint Joseph Carpenter Society is committed to assuring the privacy of individuals and/or families who have contacted us for assistance. We realize that the concerns you bring to us are highly personal in nature. We assure you that all information shared both orally and in writing will be managed within legal and ethical considerations. Your “nonpublic personal information,” such as your total debt information, income, living expenses and personal information concerning your financial circumstances, will be provided to creditors, program monitors, and others only with your authorization. We may also use anonymous aggregated case file information for the purpose of evaluating our services, gathering valuable research information and designing future programs.

Types of information that we gather about you

- Information we receive from you orally, on applications or other forms, such as your name, address, social security number, assets, and income;
- Information about your transactions with us, your creditors, or others, such as your account balance, payment history, parties to transactions and credit card usage; and
- Information we receive from a credit reporting agency, such as your credit history.

You may opt-out of certain disclosures

- You have the opportunity to “opt-out” of disclosures of your nonpublic personal information to third parties (such as your creditors), that is, direct us not to make those disclosures.
- You may opt-out of this requirement, but proof of your decision to opt-out must be recorded in your client file.

Release of your information to third parties & additional information

- So long as you have not opted-out, we may disclose some or all of the information that we collect, as described above, to your creditors or third parties where we have determined that it would be helpful to you, would aid us in counseling/coaching you, or is a requirement of grant awards which make our services possible.
- We may also disclose any nonpublic personal information about you or former customers to anyone as permitted by law (e.g., if we are compelled by legal process).
- Within the organization, we restrict access to nonpublic personal information about you to those employees who need to know that information to provide services to you. We maintain physical, electronic and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.

- I may be referred to other services of the organization, another agency or agencies as appropriate that may be able to assist with particular concerns that have been identified. I understand that I am not obligated to use any of the services offered to me.

- A counselor may answer questions and provide information, but not give legal advice. If I want legal advice, I will be referred for appropriate assistance.

Saint Joseph Carpenter Society
PROJECT REINVEST: FINANCIAL CAPABILITY
AUTHORIZATION FORM

1. I understand that Saint Joseph Carpenter Society provides financial capability counseling/coaching after which I will receive a written action plan consisting of recommendations for handling my finances, possibly including referrals to other agencies as appropriate.

2. I understand that Saint Joseph Carpenter Society submits client-level information relating to the Project Reinvest: Financial Capability grant to the NeighborWorks America Data Collection System (DCS), opens files to be reviewed for program monitoring and compliance purposes, and conducts follow-up with clients related to program evaluation.

3. I understand that I may opt-out of this requirement, but proof of this opt-out must be recorded in my client file.

4. I give permission for Project Reinvest: Financial Capability program administrators and/or their agents to follow-up with me within the next three years for the purposes of program evaluation.

5. I acknowledge that I have received a copy of Saint Joseph Carpenter Society Privacy Policy.

Release: I hereby authorize SJCS to release nonpublic personal information it obtains about me to my creditors and any third parties necessary to provide me with the services I requested. **I acknowledge that I have read and understand the above privacy practices and disclosures.**

Client's signature _____ Date _____

OPT-OUT: I request that SJCS make no disclosures of my nonpublic personal information to third parties other than project partners and those permitted by law. By choosing this option, I understand that SJCS will NOT be able to answer any questions from my creditors. I understand that I may change my decision any time by contacting SJCS.

Clients signature _____ Date _____



Client Number: _____

NOTE: If you have an impairment, disability, language barrier, or otherwise require an alternative means of completing this form or accessing information about housing counseling, please talk to your housing counselor about arranging alternative accommodations.

**St. Joseph's Carpenter Society
20 Church Street
Camden, NJ 08105
Community Resources and Services**

4. South Jersey Legal Services
Camden County Office
745 Market St. Camden New Jersey
Camden, NJ 08102
856-964-2010
Fax: 856-338-9227
SJLSC@lsnj.org
Legal representation, Advocacy

5. Volunteers of America Delaware Valley
235 White Horse Pike
Collingswood NJ 08107
856-854-4660
Emergency Housing, Home for the Brave, Community Housing and Supportive Services, Affordable and Senior Housing, Addiction Treatment, Re-Entry Services, Behavior Health Programs

6. Hispanic Family Center of South Jersey
35-47 S. 29TH St.
Camden NJ 08105
Ph: 856-541-6985
Fax: 856-662-4489
Addiction Services, Adult Education, Counseling, Domestic Violence Advocacy , Family Services, Health Education

7. Josephs House
555 Atlantic Avenue
Camden NJ 08104
856-246-1087
Emergency Shelter, Onsite Meals For guest