



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# HOPE FOR ALL

## YMCA of Greater Pittsburgh

Hope For All is a project of the YMCA of Greater Pittsburgh and YWCA Greater Pittsburgh to connect households in the Pittsburgh area to benefit programs and other supportive services.

The Y is the nation's leading nonprofit committed to strengthening communities through youth development, healthy living and social responsibility. The YMCA of Greater Pittsburgh is a 501c(3) charitable organization dedicated to nurturing the potential of every youth and teen, improving the nation's health and well-being and providing opportunities to give back and support neighbors.

### OUR PILLARS OF IMPACT



#### Access to Federal and Public Benefits Including:

- Supplemental Nutrition Assistance Program (SNAP)
- Health Insurance
- Low Income Home Energy Assistance Program (LIHEAP)
- PA Rent Rebate
- + Additional benefits



#### Direct and Referral Services:

- Food pantries
- Healthcare enrollment
- Housing
- Dollar Energy Fund
- Free Application for Federal Student Aid (FAFSA) form preparation
- + Additional services



#### Free Income Tax Preparation and Filing:

- Available for eligible tax payers
- Service provided by IRS certified volunteers
- Available at the YMCA through the United Way



#### Access to YMCA of Greater Pittsburgh Programming:

- Membership through Y For All
- Child Care and Before and After School Enrichment Programs
- Summer Day Camp
- Health and wellness programs
- Chronic disease prevention

eliminating racism  
empowering women

**ywca**

Greater Pittsburgh

### HERE FOR OUR COMMUNITY

For more information, contact the **Homewood-Brushton YMCA** or **Hazelwood YMCA** at 412 436 0524 or contact the **YWCA Resource Center** at 412 255 1488.

**Homewood-Brushton YMCA**  
7140 Bennett Street  
Pittsburgh, PA 15208  
412 243 2900

**Hazelwood Family Center**  
5006 Second Avenue  
Pittsburgh, PA 15207  
412 243 2900

**For a better us**

[ymcapgh.org](http://ymcapgh.org)

FIRST NAME	MI	LAST NAME	DATE OF APPLICATION / /
GENDER	DATE OF BIRTH / /	Are you a registered voter? <input type="radio"/> Yes <input type="radio"/> No If no, would you like to become one? <input type="radio"/> Yes <input type="radio"/> No	
ADDRESS	CITY	STATE	ZIP
CELL PHONE	ADDITIONAL PHONE	EMAIL ADDRESS	Preferred method of contact? <input type="radio"/> Phone <input type="radio"/> Email

As a non-profit organization, the Y provides basic demographic information when applying for funding from government foundations and resources to allow us to provide these services.

### Ethnicity/Race

- African American
- American Latino/Hispanic
- Asian
- Caucasian
- Pacific Islander
- 2 or more races
- Other \_\_\_\_\_

### Household Income

- Up to \$11,999
- \$12,000 - \$19,999
- \$20,000 - \$24,999
- \$25,000 - \$34,999
- \$35,000 - \$54,999
- \$55,000 - \$74,999
- \$75,000 - \$100,999
- \$101,000 -

**How did you hear about us?**  211  
 Other (Please Specify) \_\_\_\_\_

## ADDITIONAL RESOURCE INFORMATION

**Relationship Status:**  Single  Married  Divorced  Separated  Widowed

**Education Level:**  Some High School  Diploma/GED  Technical School  Some College  
 Associate's Degree  Bachelor's Degree  Master's Degree or Higher

**Current Living Situation:**  Own Home  Living with friends/family  Senior Living Facility  Rent/Lease  
 Shelter/Transitional  Drug/Alcohol Facility  Public Housing  Other \_\_\_\_\_

**Current Employment Status:**  Full Time  Part Time  Unemployed  School/Training  Disabled  Retired

**Income Source:**  None  Employment  Unemployment  Supplemental Security Income (SSI)  Child Support  
 Social Security Disability Income (SSDI)  Social Security Income  Other \_\_\_\_\_

**Public Benefits Currently Receiving:**  None  Cash Assistance  Food Stamps  Medical Assistance  
 Other \_\_\_\_\_

**Health Insurance:**  Yes  No **Single Parent:**  Yes  No

**Disability:**  Yes  No **Former or current members of the Armed Forces:**  Yes  No

**# of Adults in Your Household (Over 18):** \_\_\_\_\_ **# of Children in your Household (Under 18):** \_\_\_\_\_

## REASON FOR VISIT

FOOD ASSISTANCE	HEALTHCARE	HOUSING	OTHER
<input type="radio"/> Food Pantry / Emergency Food <input type="radio"/> Supplemental Nutrition Assistance Program (SNAP) <input type="radio"/> Temporary Assistance for Needy Families (TANF)	<input type="radio"/> Health Insurance (Medicaid, Medicare, Affordable Care Act) <input type="radio"/> Women's Healthcare <input type="radio"/> Counseling <input type="radio"/> Other	<input type="radio"/> Low Income Home Energy Assistance Program (LIHEAP) <input type="radio"/> Dolly Energy Fund <input type="radio"/> PA Property Tax / Rent Rebate <input type="radio"/> Rental Assistance	<input type="radio"/> Employment Assistance <input type="radio"/> Legal Help <input type="radio"/> Free Application for Federal Student Aid (FAFSA) <input type="radio"/> Tax Preparation <input type="radio"/> Childcare
<b>Is there another reason for your visit?</b> _____			

## STAFF USE ONLY

**Provider Site:**  Hazelwood YMCA  Homewood YMCA  
 Downtown YWCA  Homewood YWCA  
 Community Assistance YMCA

**Method of Contact:**  Phone  Walk-In  Outreach

**Status of Service:**  Needs Follow-Up  Complete  
 Could Not Contact  Other \_\_\_\_\_

**Referred to 211:**  Yes  No

**Notes:**