Side by Side
Children's Village Society

Year Intensive Housing

Application Form

Applicant Information:

First and Last Name:

_____

DOB: _____

Age: _____

Phone Number: _____

Email: _____

Social Worker/ Case worker referring: _____

Organization: _____

Phone Number:_____

Email:_____

Current Housing Arrangement:

_____

How long has the applicant been living there?

_____
_____
_____
_____
_____

Income:

Source of Income now:

1.

2.

Side by Side
Children's Village Society

Year Intensive Housing

Application Form

3.

Is the applicant prepared to pay $1300.00 for rent monthly?

_____
_____
_____
_____
_____

Education:

Is the applicant currently attending school? _____

Is it full time or part time? _____

Name of School:

_____

Program: _____

If applicant is not attending school at the moment, what are some of their future goals around education and skills
development?_____
_____
_____
_____
_____

Medical:

Does the applicant have any health concerns? Y/ N

If so, please explain:

_____
_____
_____

Year Intensive Housing

Application Form

_____
_____

Please tell us why you think you are a strong candidate for the Housing Program.

_____
_____
_____
_____
_____

Goals:

What are some goals you hope to achieve in the Housing Program?

1.
_____
_____

2.
_____
_____

3.
_____
_____

4.
_____
_____

How do you think SideBySide can help you achieve your goals?

Year Intensive Housing

Application Form

_____

_____

_____

_____

_____

_____

_____

Please list 4 skills you feel will help contribute to your independence

1.

_____

_____

2.

_____

_____

3.

_____

_____

4.

_____

_____

Do you have any concerns (Please check the following if true)

Having a youth worker checking in with you weekly? _____
Health and Wellness checks of your private room? _____

Any sensitives or concerns about moving into the Youth Shared Housing Program that SideBySide needs to be aware of?

Year Intensive Housing

Application Form

_____
_____
_____
_____
_____
_____
_____

Lastly, please be sure to attach a letter of reference from a support worker, someone who has known the youth for over year, or a family member that believes in the abilities of the applicant.

RELEASE OF INFORMATION WITH REFERRING WORKER

I, _____, hereby permit any exchange information deemed appropriate between SideBySide Housing staff and _____ to facilitate my application to SideBySide Children's Village Society's Youth Housing Program. I understand that information exchanged will be handled in a confidential manner.

Date:_____

Name (printed): _____

Signature: _____

Please submit your application and supporting documents to sheenaram@sbsbc.org

Thank you