

APPLICATION FOR ACCOMMODATION

DATE OF INTERVIEW

If you find this form difficult to understand please talk to one of the Housing Staff

DATE OF APPLICATION

Please complete this form in BLOCK CAPITALS

1. YOUR FIRST NAME

2. YOUR SURNAME (Mr/Mrs/Miss/Ms)

3. YOUR DATE OF BIRTH / GENDER

__/__/____ Male Female

4. YOUR NATIONAL INSURANCE NUMBER

ATTACH HEAD AND SHOULDERS PHOTO HERE



5. NAME AND ADDRESS OF NEXT OF KIN

Post Code _____
Their Telephone Number _____
Area Code _____
Home Work Mobile Other

6. YOUR PRESENT ADDRESS

Post Code: _____

7. YOUR CONTACT TELEPHONE NUMBER

If we cannot contact you we cannot offer you a home

Area Code _____ Tel: _____

Home Work Mobile Other

8. HOW LONG AT YOUR PRESENT ADDRESS

Years _____ Months _____

9. NAME AND ADDRESS OF LANDLORD

Post Code _____
Their Telephone Number _____
Area Code _____
Home Work Mobile Other

10. YOUR PRESENT ACCOMMODATION

Please tick below which best describes your present accommodation:

- Renting from Local Authority
- Renting from a Housing Association
- Renting from a Private Landlord
- Renting with a Job
- Living with Family or Friends
- Self contained supported housing
- Hostel/Shared supported housing
- Probation/Bail Hostel
- Children's Home/Foster Care
- Hospital/Prison (state which)
- Residential Care Home
- Bed and Breakfast
- Squatting/Rough Sleeping (Homeless)
- Other.. Please specify..

11. WHERE DOES YOUR MONEY COME FROM

Working full time/part time/circle which

State Benefits/state which (JSA, IS, DLA etc)
How long have you been unemployed _____

Other (Please state what below) _____

12. YOU MUST BE ABLE TO PAY YOUR RENT, THEREFORE WE NEED TO KNOW HOW MUCH MONEY YOU GET EACH WEEK?

What is the total money you get each week after deductions?
£ _____

How is it paid _____

What day are you paid _____

13. WHAT IS YOUR REASON FOR APPLYING?

Tick a box below which best describes your reason for wanting accommodation at the YMCA

Asylum Seeker/Refugee

To be near college course you're attending

Breakdown of a relationship

Discharged from Hospital/Prison (circle which)

Discharged from prison

Escape Domestic violence

Escape from Emotional abuse

Evicted by landlord. COMPLETE BOX

Financial difficulties. Give details in box

Escape from Harassment

Health or medical reasons. Give details in box.

You are homeless. Give details in box.

To move out of B&B or temporary home.

Living in overcrowded accommodation.

Need for your own independence.

Escape Physical abuse.

Escape from pressure from home.

To be near family and friends, employment.

To move out of shared accommodation.

To move out of another Hostel.

To take up a new job.

Other. Please describe.

14. SOURCE OF REFERRAL: How did you come to us

Referred by local authority

Referred by local authority (not nominated)

Referred by Prison/Probation/Youth Offending Team (Please state which)

Referred by Citizens Advice/Shelter (Please state which)

Referred by another Housing Association

Referred by voluntary agency (Please state which)

Referred by a YMCA (Please state which)

You are a self referral

15. ARE YOU REGISTERED WITH A DOCTOR

YES/NO Who: _____

16. DO YOU HAVE ANY SPECIAL MEDICAL REQUIREMENTS i.e. medication, disability

Please give details _____

17. TRAINING

Name of Personal Advisor/Keyworker/Tutor _____

Type of Training _____

College or Work based training _____

18. EMPLOYERS/COLLEGE/TRAINING CO. NAME ADDRESS AND TELEPHONE NUMBER

Name _____
Address _____

Telephone Number _____

SUPPORT NEEDS

Place a mark where you feel you are on the following lines. There is no right or wrong, just go with what you feel first.

For example, if you say what you think most of the time, mark like this;

Speak my mind -----X----- Keep quiet

Confident ----- Nervous

Always happy ----- Often happy

Speak my mind ----- Keep quiet

I'm very tidy ----- I'm messy

Eat healthy food ----- Junk food addict

Exercise a lot ----- Couch potato

Good with money ----- Skint for life

Like my home ----- Want to move

Like my family ----- We don't get on

Talk about my feelings ----- Bottle it up

Have lots of friends ----- Fly solo

Life is great ----- Life sucks

Can you give three of your strengths and three weaknesses

Strengths

Weaknesses

- 1.
- 2.
- 3.

SUPPORT NEEDS (continued)

Where would you like your life to be in two years time?

What sort of job or college course.

Where would you like to live.

Personal ambition.

What do you need to do to make these things happen?

For a job or course.

For a home.

For yourself.

Try and map two simple paths that will improve your situation. To get some money, to make yourself happier etc.

Path 1.

Where I am now.

What I can do.

Where I want to be.

Path 2.

Where I am now.

What I can do.

Where I want to be.

Lincolnshire YMCA's Mission Statement is:

"To demonstrate our Faith through Social Action"

The Lincolnshire YMCA is part of the YMCA in England which in turn is part of a world wide Christian Movement.

Its central aim is to enable people, particularly the young, to develop as full participants in society, by the provision of relevant services, particularly in times of need.

At its heart are Christians who, regarding Jesus Christ as Lord and Saviour, desire to share their faith with others and make him known, believed, trusted, loved, served and exemplified in all human relationships. It welcomes into its fellowship persons of other religious faiths and those of none.

Lincolnshire YMCA Eligibility criteria.

YOU WILL:

- Be aged 18-35 (People older are taken dependent on their need and current waiting list)
- Male and Female
- Be in need of personal support and guidance with managing and accessing services leading to a more stable way of life and commitment towards improving individual circumstances.
- Have an appreciation of the requirement to live independently whilst in the project.
- Have an ability and willingness to interact with other people
- Be expected to work positively with support staff and maintain regular contact throughout their stay.
- Required to disclose any known offending history, mental illness, substance misuse or disability to enable a fair assessment at interview stage.

Lincolnshire YMCA Housing Vision Statement is:

*"Its not where you came from yesterday, its what your going to do about
today to make tomorrow better"*

"Our aim is to assist people move from dependence to independence within a holistic approach. "

Assessment process

- Completed forms need to be returned to Lincolnshire YMCA for an initial assessment.
- Be invited for an interview. You will be asked a series of questions relating to your application and need for support.
- You will be notified as soon as possible about the out come of your interview.
- If you are unsuccessful you will be told why you cannot be offered accommodation. You will also be informed when to reapply, 3 months, 6 months, 12 months.
- If you are successful you will be offered accommodation or placed on the waiting list if there are no vacancies.
- Allocation from the waiting list will be made according to the need of applicants at the

