

## **WOMEN'S HOUSING APPLICATION**

**CONFIDENTIAL** 

# **FORM** Harmony House – Second Stage Housing Program

Please write clearly and tick the appropriate boxes where required. Please submit form by fax: 604-596-7721 Attn: Harmony House Coordinator, or mail application to:

Progressive Intercultural Community Services (PICS) Society

Attn: Harmony House Coordinator

#205-12725 80<sup>th</sup> Avenue Surrey, BC V3W 3A6

#### What is Harmony House?

Harmony House provides homeless immigrant women and their children fleeing domestic violence with a home that is safe, secure, and provides for basic human rights and needs of victims of violence in a culturally sensitive, linguistically accessible, and healing environment. This 2<sup>nd</sup> Stage development focuses on providing emotional support and practical assistance to women and children who are victims of domestic violence. Our 2<sup>nd</sup> Stage development focuses on healing women who are caught in a cycle of socio-economic, physical, sexual, and psychological abuse. Harmony House provides support and assistance through individual one-to-one sessions, confidence building exercises, goal setting, group therapy, and a variety of group sessions that are focused on health/wellness and empowerment.

## Who is eligible to apply?

This housing program is available to immigrant women with or without children who are impacted by relationship violence. Preference is also given to non-immigrant women and children

For more information on whether this is the right program for you please call PICS.

## What is the program cost?

If the resident receives income assistance, the program cost is based on the maximum shelter allowance. If the resident is in receipt of income from employment or other sources, the same shelter allowance is applied.

### **Privacy Declaration**

All personal information collected is for the management of service delivery by PICS Society staff. No information will be shared with anyone outside of the organization without the express permission of the applicant.



#### APPLICATION FOR HARMONY HOUSE SECOND-STAGE HOUSING

Please note: It is important that you answer ALL the questions in order to be considered for housing

1.	APPLICANT	(please	print)	١
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Applicant Surname	Applicant First Name		Work Phone Number
Home Address (Apt Number/Street Address)			Home Phone Number
City	Province	Postal Code	Cell Phone Number
Email Address			Safe Phone Number for Messages
Date of Birth (Must be 18+ to apply)			

2. HOUSEHOLD COMPOSITION Proof of identity is required for all family members.

Full Name(s) Surname First	Birthdate	Gender	Relationship to Applicant

Do ۱	you expect the size of the siz	vour household to	change in the next 12 months?	$\sqcap$ NO	☐ YES

3. INCOME INFORMATION List Gross Monthly Income (before deductions) for all members of your household from all sources. *Proof of income must be attached.* 

Name	Source (eg. Employment, Income Assistance, Employment Insurance, Pension)	Amount
		\$
		\$
		\$
		\$
		\$
	Total Monthly Income for Household	\$



4. Current/Last Employer (if applicable)

Employer	Ad	dress, Phone No.	Employer Name and Contact Information
	V 51		
	Y Please list y	our address(es) for	the past 2 years. Previous landlords may be cont
for references.			
Address		From - To	Landlord Name and Contact Information
6. DISABILITIES/HEAL	TH ISSUES Lis	t on the lines below	any member of your household with a significan
			any member of your household with a significan your housing needs (Please note: Harmony House is no
disability/health issu wheelchair accessible)		ld be considered in	your housing needs (Please note: Harmony House is no
disability/health issu			your housing needs (Please note: Harmony House is no
disability/health issu wheelchair accessible)		ld be considered in	your housing needs (Please note: Harmony House is no
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disability/health issu wheelchair accessible)  Name  7. ARE YOU CONNECT: If yes, what program?  8. REFERRAL — How did  9. VEHICLES — Do you If yes, Drivers License	ing WITH ANY you hear abou own a register	Type of Disability/h  Y PICS PROGRAMS?  t Harmony House?  red/insured vehicle? Make/Year	ealth issue  NO YES  NO YES  License Plate #:
disability/health issu wheelchair accessible)  Name  7. ARE YOU CONNECT: If yes, what program?  8. REFERRAL — How did  9. VEHICLES — Do you If yes, Drivers License	ing WITH ANY you hear abou own a register	Type of Disability/h  Y PICS PROGRAMS?  t Harmony House?  red/insured vehicle? Make/Year	ealth issue  NO YES  NO YES  License Plate #:
disability/health issu wheelchair accessible)  Name  7. ARE YOU CONNECT: If yes, what program?  8. REFERRAL – How did  9. VEHICLES – Do you	es which shou  ING WITH ANY  you hear abou  own a register No:  e list at least 2	Type of Disability/h  Y PICS PROGRAMS?  t Harmony House?  red/insured vehicle? Make/Year	ealth issue  NO YES  NO YES  License Plate #:



#### **DECLARATION**

The information you give will be kept confidential.

The Freedom of Information and Protection of Privacy Act cove information. This application is designed to collect specific information.	•
1. I /WE DECLARE:  ☐ This is my/our application and all the information in it is true	and complete to the best of my/our knowledge.
<ul><li>2. I/WE PERMIT:</li><li>PICS to verify any of the information I/we have provided in for second stage housing.</li></ul>	this application in order to access my/our eligibility
<ul> <li>3. I/WE ACKNOWLEDGE AND UNDERSTAND THAT:         <ul> <li>It is my/our responsibility to immediately inform PICS of any size, or the people sharing my/our accommodation.</li> <li>If I/we wish to withdraw this Consent, I/we may do so at any this consent will result in my/we being ineligible.</li> </ul> </li> </ul>	
Signature of Applicant	Date

**APPLICATION CHECKLIST** 



Before submitting your application to PICS please review the following to make sure that all required information is included with the application

- ✓ Applications are effective the month in which they are received by PICS
- ✓ Incomplete applications will not be accepted
- ✓ Applications received during no vacancy will be kept for 30 days. After 30 days, applications will be detroyed

#### Please do not submit original documents.

- ✓ Proof of status in Canada (proof is required for all family members)
- ✓ Copy of Canadian birth certificate(s) for all family members born in Canada, AND
- ✓ For family members not born in Canada, provide copies of citizenship papers or immigration documents.
- ✓ Acceptable proof includes:
  - Copy of Record of Landing (IMM1000) or Sponsorship Undertaking: Confirmation of Permanent Residence (IMM5292),
  - OR
  - Copy of Permanent Resident Card (both sides).
  - Any other proof of residence in Canada.
- ✓ Children age 5-10 in full-time attendance at a school must provide proof of enrolment.
- ✓ Proof of Income
  - Copies of current bank statement for all bank accounts showing a 30 day period
- ✓ Proof of current gross monthly income, from all sources (the last three consecutive cheque stubs, letter from employer or other income statement).