

Toronto Christian Resource Centre Self-Help Inc.
Housing Office
90 Richmond St., E, Suite 201 Toronto, Ontario M5C 1P1
416 591-6389 fax 416-591-5396

Dear Applicant,

Thank you for applying at CRC Self-Help for housing. CRC Self-Help (SHI) was founded in 1984 and provides social housing to low income households. At the present time, it offers primarily shared accommodation. Its portfolio is made up of up of 33 houses located in different parts of the city. They meld well with the rest of the neighbourhood

Each house has between 4 and 9 rooms. Rooms are equipped with a bed, fridge, closet and/or dresser. Tenants have their own private rooms but share common areas like the living room, kitchen, bathrooms, basement etc. in their house.

All units in our housing are subsidized by the government and are meant to provide affordable housing to low income single people. Rents are pegged at 30% of a person's income and are to be paid by the first working day of the month. When tenants can afford a market unit, they are encouraged to move on to make room for other needy applicants.

SHI employs a facilitative management model. Residents collaborate closely with each other on the maintenance and management of their house. They share in the upkeep of their home and contribute towards a joint fund to buy commonly used items. They also attend monthly house meetings to interview new tenants, discuss house issues and make decisions. Residents work in close proximity with their housing worker who has over-all responsibility of the house.

Our housing operates under the Tenant Protection Act and is governed by its provisions in its relationship with its residents. It is ultimately accountable to the City of Toronto for its overall management.

Many people find shared housing psychologically good for them for its communal and socializing aspects. Others experience difficulty adapting to this type of housing: in today's housing conditions it is not easy to transfer to a bachelor or a one-bedroom apartment.

Whatever your situation may be, we want to welcome you to our housing. We promise to work hard with you to make your stay in our housing safe and satisfying.

PREVIOUS ADDRESSES

ADDRESS 1: _____

NAME OF LANDLORD: _____ PHONE NO: _____

LENGTH OF STAY: FROM _____ TO _____

REASON FOR MOVING: _____

ADDRESS 2: _____

NAME OF LANDLORD: _____ PHONE NO: _____

LENGTH OF STAY: FROM _____ TO _____

REASON FOR MOVING: _____

PRESENT LIVING ARRANGEMENTS

WHAT IS YOUR PRESENT LIVING SITUATION?

Street _____ hostel _____ friends _____ renting: _____

CURRENT ADDRESS: _____

NAME OF LANDLORD: _____ PHONE NO _____

IF HOMELESS, HOW LONG HAVE YOU BEEN SO? _____

IF AT THE HOSTEL, WHICH ONE? _____

YOUR CONTACT PERSON THERE? _____ PHONE NO _____

SOURCE OF INCOME

WORK: ARE YOU WORKING, NOW? YES ___ NO ___ HOW LONG? _____

WHAT IS YOUR WORK? _____ AMOUNT PER WEEK \$ _____

SOCIAL ASSISTANCE ONTARIO WORKS-AMOUNT: _____

ODSP-AMOUNT: _____

OSAP-AMOUNT: _____

OTHER: NAME PROGRAM/AMOUNT: _____

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ASSETS

DO YOU HAVE POSSESSIONS (bonds, shares, properties, etc.)? YES ___ NO ___

DO THEY PRODUCE AN INCOME? YES ___ NO ___ IF YES, HOW MUCH? \$ _____

HOUSE, MY HOME

As a tenant, you will share a house with several others, residing in your private room but sharing bathroom(s), kitchen, living room and basement.

WHAT GOOD QUALITIES DO YOU BRING TO THE HOUSE?

HOW DO YOU VIEW HOUSE CHORES? _____

ON A SCALE 1 TO 10 (10 excellent), WHERE DO YOU GRADE YOURSELF re cleanliness? _____

THE HOUSE FUND BUYS COMMUNALLY USED PRODUCTS, toilet paper, lights, etc. WILL YOU CONTRIBUTE?
YES__ NO__

MONTHLY HOUSE MEETINGS help tenants communicate. WOULD YOU ATTEND? YES __ NO __

GUESTS ARE ALLOWED OVERNIGHT THREE NIGHTS A MONTH after informing and seeking approval from the tenants? WOULD YOU ACCEPT THIS?
YES __ NO __

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only

DOES YOUR LIFESTYLE INCLUDE USE OF DRUGS/IMMODERATE ALCOHOL? YES__ NO__

IF YOU DON'T USE ANY LONGER, HOW LONG HAVE YOU BEEN SOBER? _____ MONTHS

CONFLICT OR DISAGREEMENT CAN ARISE WITH ANOTHER TENANT over noise, dirty dishes, guests, etc. HOW WOULD YOU HANDLE IT?

HAVE YOU EVER BEEN VIOLENT? If yes, WHAT MEASURE HAVE YOU TAKEN TO MANAGE YOUR ANGER?

TYPE OF HOUSE AND LOCATION

WHAT HOUSE WOULD YOU LIKE TO LIVE IN ?

- **“DRY BY PROGRAM”** for people who go to AA, NA have a sponsor, etc YES___ NO ___
- **“DRY BY CHOICE”** where people do not have alcohol addiction YES ___ NO ___
- **“RESPONSIBLY WET HOUSE”**, where one can drink without causing problems for others,
neighbours or the house? YES ___ NO ___
- **WOMEN’S HOUSE”** a house for women only? YES___ NO ___

WHICH PART OF THE CITY WOULD YOU LIKE TO LIVE IN?

EAST (between Coxwell and Don River) ___ WEST (between Bathurst and Dufferin) ___
CENTRAL (between the Don River and Bathurst) ____

REFERENCES

(social worker, drop-in staff, doctor, nurse, legal counsel, etc)

NAME	RELATIONSHIP	PHONE NO
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- 1.
- 2.

SOCIAL HOUSING

HAVE YOU EVER LIVED IN SOCIAL HOUSING? IF YES, INDICATE BELOW:

ORGANIZATION	ADDRESS	PHONE NO
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1. _____
2. _____

DO YOU OWE RENT? IF YES, HOW MUCH \$ _____

(You have to pay any rent owing before you’ll be considered for social housing)

RELEASE OF INFORMATION

I HEREBY AUTHORIZE THE RELEASE OF ANY PERSONAL INFORMATION REQUESTED OF AGENCIES BY SELF-HELP INC. OR ITS AGENTS.

Applicant's signature: _____ Date: _____

DECLARATION

I DECLARE THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE

Applicant's signature: _____ Date: _____

INTERVIEWER: _____