



Please complete the Application below so that we can determine housing eligibility. Available housing consists of studio/efficiency apartments and single-room occupancy units.

## Housing Interest Form-Screening Application

Date If a Referring Agency or Case Manager is completing this application on behalf of a client, please complete the grey area at the bottom of this form

Is someone completing this application on your behalf?	Yes	No
Name	Email	Phone
		HMIS ID:

**Applicant's Information:**

First Name		
Last Name		
Date of Birth		
Phone Number		
Email address		
Do you have an ID?	Yes	No
ID Number		
Do you have a Social Security card?	Yes	No
Social Security number		
How long have you been homeless?		
Do you have a Disability?	Yes	No
If yes, what is the disability?		
Do you require a Reasonable Accommodation?	Yes	No
If yes, please describe:		
Do you need a unit with accessibility features?	Yes	No
If yes, please indicate:		
Do you have an income?	Yes	No
If yes, what is the income		
Income amount		
Frequency		
Do you have a bank account?	Yes	No
Can you provide proof of income?	Yes	No
Are you a Veteran? <b>Please specify discharge:</b> _____	Yes	No
Do you have a voucher such as, VASH, EHV, or any other Tenant Based Voucher?	Yes	No
Can you pass a criminal background screening?	Yes	No
This information will help us to identify the most appropriate housing program for you.		

**NOTE:** Please specify unit type (**SEE below**) - may have a waiting list for units with amenities (bathroom & kitchenette), but may have immediate housing availability for a private Single-room occupancy unit with shared bathroom and community kitchen, if willing to accept.

### TO BE COMPLETED BY REFFERAL AGENCY OR CASE MANAGER

Please provide the name of the referral agency

Name of case manager Phone Email

If ICMS Services requested, does the client need retention services? Yes No High\_\_\_ Med\_\_\_ Low\_\_\_ Specify

Unit Type: **Unit without Bathroom/Kitchenette** \_\_\_ **Unit with Bathroom only - Community Kitchen** \_\_\_ **Unit with all amenities** \_\_\_



Download form and complete all applicable questions  
 Save and attach form to email  
 Send email to: [PSHVacancy@srohousing.org](mailto:PSHVacancy@srohousing.org)  
 For additional information contact 213-229-9640 ext. 1022