**Youth Housing Navigation & Subsidy Support Program**

**Application**

**The Youth Housing Rental Supplement Application**

The Youth Housing Navigator program at WoodGreen Community Services assist young people between the ages of 16-30 in identifying, securing and sustaining safe and affordable housing in Toronto and the GTA. As part of this program, the navigator will assess the applicant’s financial health in securing and sustaining all available units within a realistic and sustainable price range. Subsidy will be determined based on the cost of the unit and the amount of income earned in order to realistically afford and sustain without creating undue hardship or potentially increasing the risk of homelessness after the contracts date of completion. **Subsidy is paid directly to the landlord, and reassessed every three months. If renewed after three months, subsidy will be reassessed again in the following quarter, but not exceeding (1) one year or based on funding availability. Amounts may vary depending on income, expenses and the programs funding availability.** **Subsidies are not guaranteed**.

**Eligibility Criteria**

* Youth between the ages of 16-30
* Living in Toronto and GTA
* Street Homeless or precariously housed

**Completing the Application**

This application is meant to provide the Youth Navigator with a general understanding of your housing situation and needs. It will also be used to help identify specific areas which you may require some additional supports or resources in order to ensure you are able to remain housed. Please try your best to answer all questions, as the more information we have about your situation, the better we can understand what types of supports you are in-need of and how we may be able to assist you.

**Submitting the Application**

Please direct all completed applications or questions to Will McCarty

Email: WMcCarty@woodgreen.org

**Applicant & Referral Source Information**

Name of person making referral:       Agency:

Position:       Telephone:

Email:       Today’s Date (M/D/Y):

|  |
| --- |
| Young Persons First & Last Name:  Telephone:       Email:  Is it safe to leave a voicemail? Yes  No  Personal Pronouns:      Preferred name:  Date of Birth (M/D/Y): |
| n  **How Do You Identify?**  Please tick all that apply:  Boy/Man  Girl/Woman  Cisgender  Intersex  Non-Binary  Non-Conforming  Transgender  Two-Spirited  Questioning/Exploring  Prefer Not to Say  Don’t Know  Something Else  Do you identify as a member of the 2SLGBTQIA+ Community Yes  No  Black  Asian (South)  Asian (East)  Caucasian  First Nations  Metis  Inuit  Hispanic, Latino, or Spanish Origin of Any Race  Multi-Racial  Prefer Not to Say  Something Else  **Citizenship & Status**  Please tick all that apply:  Canadian Citizen  Permanent Resident  Refugee  International Student  Work Permit  Something Else  Are you legally entitled to work in Canada? Yes  No  Are currently or have you ever been involved with a Children’s Aid Society as a “youth in care” Yes  No |

**Employment and Education**

Please tick all that apply:

Working Full Time

Working Part Time

Pre-Employment Programming

Unemployed

High School

Post-Secondary (College, Univerisity, Trades Certification)

Not in School (High School Completed)

Not in School (High School Not Completed)

**Current Housing and Address Information**

Are you currently homeless Yes  No

If you are currently housed, please tick the option that best applies to you:

Renting a place on my own

Renting a place with a roommate

Living in a school residence

Living with parent/family member (paying rent)

Living with a parent/family member (not paying rent)

Current Address      

*Street Address Apartment/Unit# #*

     

*City Postal Code*

Do you currently have an eviction notice or any immediate threats to your housing?

Yes  No

Please describe

Are you currently/or will you be responsible for any dependants’ (children/youth/anyone under the age of 18) where you are, or will be living while in the program? Yes  No

If yes, please tell us how many dependants’ under the age of 18 will be living with you

Please tell us how old each child is in years

If you are homeless, please tick the box that best applies to you:

Neighbor

Friend’s house (or couch surfing)

Shelter

Hospital

Jail

Streets (park, squat, laneway, stairwell etc)

Transitional or Supportive Housing

If applicable, how long have you been experiencing homelessness?

Less than <30 days

More than >30 day

Three months of less

Six months of less

Twelve months of less

More than one year (12+)

If you are living in shelter, transitional or supportive housing, have you been given a date that you have to leave by? Yes  No

Please provide the date:

Are there any criminal justice matters (active charges before the courts) that might impact your access to housing? Yes  No

**General Request for Support**

**What type of support are you seeking?**

Financial support Only

Financial and Navigation Support

Please describe in as much detail a possible what type of support you are looking for:

*Please note that acceptance into the YHN program does not mean you are approved for rental subsidy. Eligibility for subsidy is determined by the program using a rental subsidy eligibility calculator. Assessment of subsidy eligibility takes place both during intake and at any other point that rental subsidy is requested. Please ask your worker or the person conducting intake if you have questions regarding rental subsidy eligibility criteria.*

**Are you interested in exploring other supports at WoodGreen? (check all that apply)**

Walk-In Counselling

Psychiatry

Cultural or Recreational Programming

Women’s Housing and Education Programming

Financial Literacy Programming

Tax Filing

Employment Programming and Supports

Education Supports and Homework Help

Other:

**Declaration and Signature**

*Please understand that we have many young people who are interested in support and would very much like to access the program. If you complete an application, but choose not to follow through, please simply let us know. We will not be upset. It is your right to make the choices that best suit your life and circumstances. All we ask is that you or your worker let us know, so we can give someone else a chance to apply. If we are not able to reach you within the first 14 days, and we do not hear from either you or your worker so we can understand the reasons for the lack of contact, we will assume you are no longer interested in the support.*

*I**(Print Full Name) acknowledge that all the information I have provided are accurate and truthful to the best of my knowledge. I understand that any misinformation could disqualify me from receiving the youth housing subsidy support, and could impact my eligibility in accessing other services at WoodGreen Community Services.*

***X***

***Applicants Signature***