

Prospective tenant to complete this form. **Providing all information requested in this referral document will enable an assessment of eligibility to be completed without significant delay.**

## HYPA HOUSING

This application form is to help us get to know you and work out how ready you are to join HYPA Housing. It is designed to draw on your strengths, your interests and find out how motivated you are in achieving your goals. Equally, this may be the first time you have lived on your own and what supports can we offer you to make living independently as stress free as possible.

HYPA Housing is for young people aged 17-25 years who are homeless\* or at risk of becoming homeless and assessed by HYPA as:

- Willingness to engage with the HYPA Housing Community Coordinator and Youth Worker;
- Currently engaged in 15 hours per week of education, training and/or employment;
- Sufficient living skills to live independently; and
- An ability to commit to community housing principles.

**\*homeless means the young person's current living arrangement:**

- is in a dwelling that is inadequate; or
- has no tenure, or if their initial tenure is short and not extendable; or
- does not allow them to have control of, and access to space for social relations.

HYPA Housing is community and apartment style living that offers up to a 24 month lease.

In HYPA Housing, young people receive:

- Affordable rent;
- An individualised plan for achieving their goals;
- A strengths-based approach to linking them with their local community;
- Support to maintain employment, education and/or training;
- Assistance to develop independent living skills;
- Support in securing an ongoing, long-term housing option and a rental reference.

Holistic support is provided by:

- The HYPA Housing Community Coordinator who supports the young person to achieve their goals;
- Youth Workers who support young people in their independent living skills;
- Trained peer mentors;
- Support from the Community Leader.

## PERSONAL DETAILS

Name: \_\_\_\_\_ Date of referral: \_\_\_\_\_  
 DOB: \_\_\_\_\_ Contact number: \_\_\_\_\_  
 Gender: \_\_\_\_\_ Income Source: \_\_\_\_\_  
 Income Amount: \$ \_\_\_\_\_ Next Pay Day: \_\_\_\_\_  
 Language: \_\_\_\_\_ Country of Birth: \_\_\_\_\_  
 Email address: \_\_\_\_\_  
 How did you hear about HYPA Housing? \_\_\_\_\_

Do you identify yourself as Aboriginal or Torres Strait Islander?

- Aboriginal
- Torres Strait Islander
- Both
- Neither

How would you describe your current residency status?

- Australian
- Permanent Resident
- Temporary Resident (please explain) \_\_\_\_\_
- Other (please explain) \_\_\_\_\_

How long have you lived in South Australia? \_\_\_\_\_

Did anyone support you in filling this form out?

- Yes
- No

Name: \_\_\_\_\_  
 Organisation: \_\_\_\_\_  
 Contact Details: \_\_\_\_\_

Please provide details of any accompanying children

**\*\*\*\*please fill in a separate application for an accompanying partner, friend or sibling \*\*\*\***

Name	DOB	Gender	Relationship to you

Desired HYPA Housing Area:

- Adelaide
- Mansfield Park
- Smithfield
- Munno Para
- No Preference

## CURRENT HOUSING SITUATION:

Please tell us about your current housing situation? Where are you living? How long have you been here? How much rent are you paying? What are the reasons you need to leave?

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## EDUCATION AND TRAINING:

If you are currently enrolled or attending education or training please provide the following details:

School or Institution you are attending or enrolled at: \_\_\_\_\_

Course Title: \_\_\_\_\_

Commencement Date: \_\_\_\_\_

Length of Course/School Year: \_\_\_\_\_

Which one of these options describes your motivation to get involved in education or training;

- I have no interest in education/training
- I have not thought about education/training recently, but I am open to it
- I am thinking about education/training, but have not looked into it yet
- I am motivated; I really want to get into education/training soon
- I am so motivated that I am already involved in training/education

## EMPLOYMENT:

Are you currently employed; please tell us about your job.

Job Title: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Hours per week that you work: \_\_\_\_\_

Date started: \_\_\_\_\_

If you are not currently in employment, can you please describe your willingness and motivation to get involved in employment;

- I don't mind being unemployed
- I have thought about getting a job/volunteering work but I never seem to do anything to make it happen
- I would like a job/volunteer work and this is something I would like to work towards
- I have had a job/volunteer position in the past and I would like to find another
- I already have a job/volunteer position and working is something that I value

Who is your Jobactive provider?

- Job Prospects
- Workskil
- Mission Australia
- Jobs Statewide
- Other (please specify) \_\_\_\_\_
- Not Applicable

How often do you meet with your employment consultant? \_\_\_\_\_

## COMMUNITY ENGAGEMENT:

Which one of these options would you say most closely describes your motivation to get involved?

- I have no interest in getting involved in community activities or groups
- It is not something I have thought about but would consider this
- I am starting to think that I would like to get more involved in activities/groups
- I am keen to get involved in activities/groups
- I am already involved in groups/community activities

Can you please describe your community activity that you are involved in?

\_\_\_\_\_

Can you please describe an activity that you would like to get involved in?

\_\_\_\_\_

How confident do you feel about getting involved in groups and social activities?

- Extremely confident
- Very confident
- Moderately confident
- A little confident
- Not confident

## GOALS:

**What would you like to achieve in:**

Time Frame

Your Goal

1 month	
2 months	
3 months	

What support would you want to achieve this?

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## STRENGTHS/INTERESTS:

Can you describe what your strengths are? i.e. organised, friendly, enthusiastic, etc

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Can you describe what your interests are? i.e. sport, reading, art, music, IT etc

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## INDEPENDENT LIVING:

How often do you cook lunch or dinner?

- Every day
- Once or several times a week
- Once or several times a month
- Once or several times a year
- Never

What are your favourite meals to cook? Would you like to learn more recipes?

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How confident do you feel about being able to live in close proximity of others?

- Extremely confident
- Very confident
- Moderately confident
- A little confident
- Not confident

How often do you run into money problems?

- All the time
- Often
- Sometimes
- Rarely
- Never

Please tell us if there is anything that you would like additional support with;

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## DEALING WITH CONFLICT:

Which of these statements sounds most like you?

When someone really annoys me;

- I walk away from the argument to cool down
- I shout and yell at the person and then make up
- I hold a grudge and make sure that I make them feel uncomfortable any time I am around them
- I get really angry in the moment and sometimes punch the person, which I regret later
- I punch or hit the person; I think they deserve it.

Has there been a time where someone has upset, annoyed or disrespected you? How did you respond to this?

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## MENTAL AND EMOTIONAL WELLBEING:

Have you had any concerns around your mental health?

- yes
- no

Please tell us a bit more about this if yes to the above:

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Have you ever been diagnosed with a mental health issue?

- yes
- no

If yes, please tell us what the diagnosis was and a little bit more about it:

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Do you have a mental health worker? Can you please provide the contact details of who your worker is and how frequently you have appointments.

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## HEALTH:



Please tell us about any physical health concerns you may have:

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Do you have any mobility access requirements?

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## DRUGS AND ALCOHOL:

Do you use drugs/alcohol?

- yes - Please describe (what type, how often)  
 no

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Have you used drugs/alcohol in the past?

- yes - Please describe (what type, how long ago)  
 no

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## LEGAL:

Do you currently have any legal matters that you are dealing with?

- yes  
 no

Please tell us a bit more if yes to the above:

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Do you require any legal support?

- Yes  
 No

Do you have a Community Youth Justice or Corrections Worker?

Justice Worker: \_\_\_\_\_

Contact Details: \_\_\_\_\_

\*\*\*\*Please attach a copy of any current bail conditions, orders etc

Is there anything else that you would like to add in your application?

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## REFERENCES:

Support Worker/Employment/Education/or Personal  
*These will be checked prior to any young person being approved for HYP A Housing.*

**Reference 1:**

Name: \_\_\_\_\_  
Contact number: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Email address: \_\_\_\_\_

**Reference 2:**

Name: \_\_\_\_\_  
Contact number: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Email address: \_\_\_\_\_

I ..... (young person's name) give my permission for the HYP A Housing Community Coordinator or any HYP A staff member acting on their behalf, to contact the above people for the purposes of my application to live within HYP A Housing. The signed permission form will be located on my file.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*SYC collects personal or sensitive information about you in order to provide SYC's services. SYC may need to disclose your personal or sensitive information to other agencies in order to provide the services you have requested but will only disclose that information which is necessary to provide that service. By completing this form you agree to SYC using or disclosing your information where necessary. You may also remain anonymous, however SYC may be unable to provide the services you are requesting if you do not provided us with your personal or sensitive information. All personal and sensitive information collected by SYC is protected under the Privacy Act(1988) and the Australian Privacy Principles. SYC may also use aggregate or de-identified personal data for the purposes of program evaluation activities. SYC will not disclose your personal or sensitive information without your consent. Refer to SYC's Privacy Policy for further information.*

*SYC follows the South Australian Government Information Sharing Guidelines for promoting safety and wellbeing (ISG) and other State government Information Sharing Guidelines. This means that SYC will work closely with other agencies to coordinate the best support for you and others. Under the ISG a person's informed consent for the sharing of information will be sought and respected in all situations unless:*

- 1. disclosure is authorised or required by law, or*
- 2. (a) it is unreasonable or impractical to seek consent; or consent has been refused; and  
(b) the disclosure is reasonably necessary to prevent or lessen a serious threat to the life, health or safety of a person or group of people.*