



Phone: 905-635-0663  
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*An outreach program for youth 16-24 who are homeless or at risk of becoming homeless.*

### **BRIDGE HOUSE**

Bridge House is transitional housing for up to 3 youth. Length of stay can range from 6 to 24 months.

Admission criteria:

1. Be between 16 and 24 years of age.
2. Be homeless.
3. Be willing to work cooperatively with others.
4. Be willing to work on developing life skills that will lead to independent living; which includes meal planning and preparation, budgeting, banking, maintaining personal hygiene, laundry and household cleaning.
5. Be willing to participate in furthering their education, job training or employment.
6. Be willing to acquire and follow through with mental, physical and dental needs as they arise.
7. Be willing to participate in social recreational activities or volunteer work.
8. Be willing to follow the rules set forth in the service contract and health & safety policy.
9. Be willing and able to pay \$350 per month for rent.

If you meet the above criteria please complete this application as thoroughly as possible.

All information obtained in this application will be helpful to understand you. Any answers provided will not exclude or keep you from being considered. All information will be kept confidential.

#### **Personal Information:**

Name:

First

Last

Preferred Name

Date of Birth:

Identified Gender:

Male

Female

Transgendered

Last Address:

Street

City

Postal Code

Contact #:

Alternate #:

Email/MSN ID:

Health Card #:

Emergency Contact:

Name

Relationship

Telephone Number:

#### **Demographic Information:**

Legal Status:  Canadian Citizen

Native Status

Permanent Resident

Convention Refugee       Immigrant       Other:

How do you identify yourself? Please check all that apply.

Black/African Canadian       Hispanic/Latino       White       Aboriginal       Asian  
 South Asian       West Indian       Middle Eastern       Other:

Language:

Primary

Secondary

Are there any traditional, cultural, spiritual or religious beliefs/practices that are important to you while you are living at Bridge House?

**Education:**

Last Grade Completed:      Are you presently in school?  Yes       No

If you are presently in school, is it:  Full-Time       Part-Time       Night School

College       University       Other:

What school/institution are you presently attending?

Do you have any identified challenges such as:  Learning Disability       Developmental Disability

ADD/ADHD       Unknown       Other:

Do you have any other education, training or volunteer experiences?

**Source of Income:**

Full-time wages       Part-time wages       Casual/temp wages       Ontario Works

Ontario Disability Support Program       None       Other:

If you are currently employed, where are you working?

How long have you been employed there?

What are your typical hours of work?

What is your average weekly income?

**Health:**

Do you have any Physical Health Concerns?  Yes       No      If yes, please explain:

Are you currently taking any medication for physical health issues? If yes, please list:

Do you have a Family doctor?  Yes  No If yes, who?

Do you have any Mental Health Concerns?  Yes  No If yes, please explain:

Are you currently taking any medication for mental health issues?  Yes  No

If yes, please list:

Are you receiving any support from other agencies or professionals (therapist, counsellor, psychologist, etc.)?  Yes  No If so, by whom?

Do you have any Substance (Alcohol or Drugs) Misuse Concerns?  Yes  No

If yes, please explain?

Do you smoke cigarettes?  Yes  No If yes, how many do you smoke per day?

Do you have any gambling concerns?  Yes  No If yes, please explain:

Do you have any known allergies?  Yes  No If yes, please explain:

Do you have any life threatening allergies?  Yes  No If yes, please explain:

Would you like support exploring any health concerns? Please check all that apply:

Physical  Social/Emotional  Substance Misuse (Alcohol/drugs)

Other:

**Current Living/Housing Arrangement:**

With Parents  With Friends  Other Family  Shelter:

Couch Surfing  Street  Other:

How long have you been living there?

How long can you stay there?

Do you feel safe/comfortable there?  Yes  No

If not, please identify the concerns:

**Criminal History:**

Are you currently on probation or bail?  Yes  No If yes, until when?

If yes, please list charges and conditions of probation or bail:

Name of Probation Officer:

Do you have any outstanding charges or bench warrants?  Yes  No

If so, what are they?

Do you have any outstanding court dates?  Yes  No If yes, when?

**Getting to know YOU!**

Check off any characteristics that you feel best describe you:

- |                                      |                                      |  |
|--------------------------------------|--------------------------------------|--|
| <input type="checkbox"/> Hard worker | <input type="checkbox"/> Organized   | <input type="checkbox"/> Friendly      |
| <input type="checkbox"/> Reliable    | <input type="checkbox"/> Trustworthy | <input type="checkbox"/> Determined    |
| <input type="checkbox"/> Loyal       | <input type="checkbox"/> Independent | <input type="checkbox"/> Good listener |
| <input type="checkbox"/> Risk taker  | <input type="checkbox"/> Athletic    | <input type="checkbox"/> Leader        |
| <input type="checkbox"/> Follower    | <input type="checkbox"/> Creative    | <input type="checkbox"/> Artistic      |
| <input type="checkbox"/> Dependable  | <input type="checkbox"/> Other:      |  |

Do you have any hobbies, interests, or anything that you just like to do?

What skills or strengths will you bring to this home that will improve everyone's experience?

Please identify any supportive relationships in your life (i.e. family, friends, pets, teachers, professionals etc.):

Please list 3 specific goals that you would like to accomplish while you are staying at Bridge House:

- 1.
- 2.
- 3.

How can this program as well as those you will be living with best assist/support you in achieving these goals?

At Bridge House, what do you believe you will require to be successful?

At Bridge House, you will be expected to live cooperatively within a diverse group of people. Do you have any concerns about living with someone who:

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| Is of the opposite sex?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Has a mental health concern?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Has a different ethnic background?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Has a physical/developmental disability?                                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Has a sexual orientation or gender identity that is different from your own? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Has a criminal record?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Smokes?

Yes

No

Is there anything else you would like to tell us about yourself?

Do you have any idea how long you might live at Bridge House before you are ready to live successfully on your own?

Less than 3 months

3-6 months

6-12 months

12-18 months

18-24 months

Unknown

Would you be willing to sign an agreement which outlines your rights and responsibilities, including the expectations of living at Bridge House?  Yes  No

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please fax (905-333-1844) to the attention of Bridging the Gap.

For internal use only:

\_\_\_\_\_  
Reviewed by

\_\_\_\_\_  
Date