

The Social Housing Registry of Ottawa



VETERANS' HOUSE

A Multifaith Housing Initiative Project

Additional Assessment Information – Veterans House, Multifaith Housing Initiative

Please complete the questions as fully as possible and return to:

The Registry at 2197 Riverside Dr., 5th Floor, Ottawa Ontario K1H 1A9

We appreciate you taking your time to answer the following questions, as it will help Multifaith Housing Initiative to assess your present housing and life situation to determine preliminary eligibility for Veterans' House Supportive Housing.

Part A: General Information

Name: _____ Date of Birth: _____

1. Are you receiving support services from a Mental Health Community Support Service (MHCSS) agency or Assertive Community Treatment Team (ACTT)?

Yes, indicate the agency below and provide your support worker's information.

Canadian Mental Health Association (CMHA)

Montfort Renaissance

Somerset West Community Health Centre

Sandy Hill Community Health Centre

Assertive Community Treatment Team (ACTT)

Support Worker Name: _____

Contact Number: _____

No

If no, have you applied for MHCSS or ACTT services?

Yes

No

2. Are you receiving support services or Case manger Services from Veterans Affairs Canada?

Yes

Support Worker Name: _____

Contact Number: _____

No

3. Do you have a doctor?

Yes

No

If Yes, please select:

Family Doctor

Psychiatrist

4. Are you taking any prescribed medication?

Yes

No

If Yes, do you need assistance with managing your medication?

Yes

No

5. Have you been evicted from housing in the last three years?

Yes

No

If Yes, please explain:

6. What is your current address? _____

7. Have you had any assistance from the Royal Canadian Legion?

Yes

No

If Yes, what branch(es):

8. Do you have any addictions?

Yes

No

If Yes, what is your addiction?

9. Do you have problems with hoarding?

Yes

No

10. How would you rate your skills with the following:

| | None | Low | Basic | Okay | Good |
|------------------------|-------------|------------|--------------|-------------|-------------|
| Cleaning Skills | | | | | |
| Cooking Skills | | | | | |
| Laundry Skills | | | | | |

Part B: Service History

By answering these questions, you help us to confirm your service and thus your eligibility for a place at Veterans' House.

1. Did you serve in the Canadian Armed Forces (CAF) or the RCMP?

Identify one: **CAF** (go to Q2) **RCMP** (go to Q11)

2. What Branch of the Canadian Armed Forces did you serve in? **Army** **Navy** **Air Force**

3. Which component? **Regular** **Reserve (including Rangers)**

4. Do you remember what Units/Regiments/Ships/Bases you served in?

5. Did you deploy? If so, where and approximately when?

6. Can you say approximately when you joined, and when you left the CAF?

7. Can you remember your SIN or Service Number? Or your "last 3"?

8. Can you remember your MOC or Trade?

9. What rank did you attain?

10. Will you share why you left the CAF?

11. Do you remember what Detachment(s) you served in?

12. Did you ever deploy in support of an international mission, and approximately when?

13. Can you say approximately when you joined, and when you left the RCMP?

14. Can you remember your Regimental Number?

15. Can you remember any specialty qualifications or training that you took?

16. What rank did you attain?

17. Will you share why you left the Force?

Declaration and Consent

I understand that this information will be used by Multifaith Housing Initiative to determine my eligibility for its supportive housing. I agree that Multifaith Housing Initiative can contact the agencies and individuals that I have specified in this form to seek information about my housing and support needs for the duration of my application period.

I understand that I may withdraw my application and associated consent at any time by contacting the Social Housing Registry.

I certify that the information provided is correct. I understand that any misleading information could be grounds for termination of the Multifaith Housing Initiative application process and/or tenancy.

I understand that Multifaith Housing Initiative may contact me for an interview.

X _____
Signature Date