

INTAKE FORMFAX TO Housing Team 541-984-3124

This information will be kept confidential. The information collected will only be used for reporting purposes associated with Rent Well.

Name of Student:			Date:			
Email:						
Address:						
City: State:	Zip:	P	hone:	- 		
Emergency Contact: (name)				(phor	ne)	
Emergency Contact Address (an address wi	nere a six-mon	h follow-up	is likely to	reach yo	u:	
Race THIS INFORM.	ATION WILL B	E KEPT CC	NFIDENTI	IAL		
American Indian / Alaska Native American Indian / Alaska Native & Black / Af Am Asian & White Black / African American & White White		American Indian / Alaska Native & White Asian Black / African American Native Hawaiian/Other Pacific Islander Other				
Ethnicity Hispanic Non-Hispanic		Date of I	Birth:			
Gender—mark one box Female Male Non-Binary Prefer no	t to Answer	Age—m a	ark one l 25-35	35- 50	50-65	65 and above
Other Characteristics						
Are you a Veteran? Are you disabled? Are or have you even been on Probation or F	Parole?	yes yes yes	no no no			

Please provide information about your household living situation as of TODAY

Your household is best described as -

Single Parent Two Adults / Children

Two Adults / No Children

Single Individual

Extended Family (living with relatives)

Unaccompanied Youth Grandparents and children

Household Size -- How many people live with you?

How many people in your household are under the age of 18?

Income Level — Income for you **and** your Household

Please count the amount **before** taxes? (Check all that apply)

Employment Monthly Gross \$ Unemployment Monthly Gross \$ AFDC/TANF Monthly Gross \$ SSI/SSD Monthly Gross \$

Child Support Monthly Gross \$ None

Pension Monthly Gross \$

Other Monthly Gross \$ specify
Other Monthly Gross \$ specify

Other Monthly Gross \$ specify Total Income\$

Where do you live right now? (Check one box)

I Rent I am on the street/in a car I am in Transitional Housing

I am in Jail/Prison I am in a Shelter I Own my Home

I am temporarily staying with family/friends

Substance abuse treatment facility

Hotel / Motel with voucher Hotel / Motel without voucher Other (please specify)

Prior Living Situation (Check all that apply)

Rental Housing Emergency Shelter On the street/in a car
Transitional Housing Psychiatric Facility Living with family/friends

Hospital Substance abuse treatment facility Hotel / Motel with voucher Jail/Prison Hotel / Motel without voucher Other (please specify)

Rental Barriers (check all that apply)

I have an eviction on my record.

I owe money to a Landlord that is past due.

I have a criminal history that is making it hard for me to get housing.

I have been denied housing because of my credit.

I have had no prior rental history or have had a large gap in my rental history.

A Landlord I have rented from in the past is giving me a bad reference.

Current or past alcohol/drug problems have made it difficult for me to find or keep housing.

I do not have money for move-in costs or rent.

I am between 16 and 27 years of age and was within the jurisdiction of the juvenile court within the past 10 years.

How did you hear about Rent Well?

Instructors should keep a copy of this form for their records

Friend/Family Community Agency/Case Worker Homes for Good

Housing Authority Housing Connections Website Other

INSTRUCTOR:			
The information below is being collected for	statistical reasons and reported to local and st	ate agencies.	
Agency where class was taken:	Laurel Hill Center	Graduation Date:	

PART II: AGREEMENT OF UNDERSTANDING (participant reads and signs)

To gain a better understanding of how Rent Well can benefit you, please read (or have it read to you) and sign the following agreement. If you have questions, please ask your Instructor before signing.

HOW RENT WELL WORKS / RELEASE OF INFORMATION

By taking Rent Well I understand that:

- · I will become educated about my rights and responsibilities as a renter.
- I will learn about affordable housing and the steps to take to overcome screening barriers such as evictions, criminal history and credit problems.
- There will be landlords willing to consider Rent Well graduates, but there is no guarantee or promise a landlord will rent to me. Some landlords use a special screening criteria just for Rent Well graduates.
- Some landlords are willing to consider issues on a case-by-case basis.
- Homes for Good, Laurel Hill Center, and other Agencies teaching Rent Well are not responsible for decisions made by any landlord.
- The program does not offer rent assistance, nor help with security deposits.
- The Rent Well Instructor and staff at Laurel Hill Center are here to help, but are not lawyers and therefore cannot give me legal advice.
- I must attend every training session and complete all of the work to earn a Certificate of Completion.
- I must develop and complete the terms of a Personal Contract to earn a Certificate of Completion.
- · I will complete a Post Graduation Plan to help me stay focused once the class is over.
- I will submit an "I've Rented!" Card to Laurel Hill Center after signing a rental/lease agreement or a "Change
 of Address" Card when my contact information on my Intake Form changes.
- Laurel Hill Center will contact me to complete an additional Follow-up Form one year after graduating from Rent Well.

*IMPORTANT NOTE – It is important that you update your contact information given on the Intake Form when it changes. We cannot send a 6 Month Follow-up Form without current information. -Please use the Change of Address Card in your graduation packet or contact your case manager.

By signing this form, I give my consent for <u>Laurel Hill Center</u> to share the information on this form with WellSky (who will share this information with the State of Oregon and other funding providers). I have read and understand this statement.					
Participant Signature	Date				