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E-mail: [home@sover.net](mailto:home@sover.net)  
Website: [HomeShareVermont.org](http://HomeShareVermont.org)  
Fax: (802) 651-0881

Dear Friend:

Welcome to HomeShare Vermont! The enclosed brochure tells you a little more about our programs and how they work. Thank you for your interest and we look forward to working with you. HomeShare Vermont is a United Way agency and we have successfully matched thousands of people in our Homesharing and Caregiving programs in our twenty five year history.

Also enclosed are an application, reference sheet, and information about our service fees. Please complete the application and reference sheet and return them to us, along with a \$15 application fee. Once we receive your application, we will call you to schedule your personal interview, which will allow us to get to know you better so we can find just the right person for you.

If you want to be a caregiver, please bring two forms of identification to the interview, one of which should be a government issued photo ID (driver's license, passport, social security card, etc). Also at the interview, applicants are required to sign release forms permitting us to do criminal background and abuse registry checks.

If you need care, interviews will be scheduled to take place with you personally in your home.

If you have concerns or difficulties with the application you can call us to schedule an appointment and we can help you complete the application.

Thank you again for your interest in HomeShare Vermont. We look forward to meeting you! If you have any questions or concerns, please feel free to call us at 863-5625, e-mail us at [home@sover.net](mailto:home@sover.net) or visit our website at [www.homesharevermont.org](http://www.homesharevermont.org).

Sincerely,

MaryLou Thorpe  
Caregiving Coordinator



Which of the following towns in the Champlain Valley do you prefer?

- |                                     |  |  |   |                                     |
|-------------------------------------|--|--|---|-------------------------------------|
| <input type="checkbox"/> Burlington | <input type="checkbox"/> Bolton        | <input type="checkbox"/> Essex         | <input type="checkbox"/> Essex Junction | <input type="checkbox"/> Hinesburg  |
| <input type="checkbox"/> Charlotte  | <input type="checkbox"/> Colchester    | <input type="checkbox"/> Milton        | <input type="checkbox"/> Richmond       | <input type="checkbox"/> Shelburne  |
| <input type="checkbox"/> Huntington | <input type="checkbox"/> Jericho       | <input type="checkbox"/> Underhill     | <input type="checkbox"/> Williston      | <input type="checkbox"/> Winooski   |
| <input type="checkbox"/> St. George | <input type="checkbox"/> S. Burlington | <input type="checkbox"/> Isle La Motte | <input type="checkbox"/> North Hero     | <input type="checkbox"/> South Hero |
| <input type="checkbox"/> Alburg     | <input type="checkbox"/> Grand Isle    |  |   |                                     |

PLEASE CHECK ALL THAT MAY APPLY TO YOU:

- I have a car       I need a driver       I take the bus
- Will you hire/work with a     MALE       FEMALE
- Do you smoke?    Y / N                      May your caregiver/care receiver smoke?    Y / N
- How many pets do you have? \_\_\_\_\_ What kind(s)? \_\_\_\_\_
- Will you accept working with someone who has pets?    Y / N
- How many hours of care will you need/provide each week: \_\_\_\_\_ hours/week
- What hourly salary will you require/offer?    \$\_\_\_\_\_ /month

Annual Household Income: \_\_\_\_\_ Number of adults in household: \_\_\_\_ Number of children: \_\_\_\_

*I hereby acknowledge that all the information I have given in this application is true and complete to the best of my knowledge and belief. I authorize HomeShare Vermont to check references and to verify any information in this application. I understand that providing any false or misleading information will make me ineligible for the services of HomeShare Vermont.*

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

.....  
 For reporting and statistical purposes, our funders require that we ask for the following information. This information will help determine that HomeShare Vermont does not discriminate in its services.

Ethnicity (Check more than one if applicable):

- |  |   |                                   |
|--|---|-----------------------------------|
| <input type="checkbox"/> White                   | <input type="checkbox"/> American Indian/Alaskan Native   | <input type="checkbox"/> Asian    |
| <input type="checkbox"/> Black /African American | <input type="checkbox"/> Native Hawaiian/Pacific Islander | <input type="checkbox"/> Hispanic |

Do you have a disability?    Y / N

PLEASE INCLUDE THE FOLLOWING WITH YOUR APPLICATION.  
*If any of these items are missing, your application will be considered incomplete.*

- COMPLETED REFERENCE SHEET (SEE ATTACHED)
- \$15 APPLICATION FEE
- RESUME (if Available)

## HomeShare Vermont – HOURLY CARE REFERENCES

Applicant \_\_\_\_\_ Date \_\_\_\_\_

- All references should be people who have known you at least 1 year. Together, the references should cover a span of at least 5 years to the present.
- If you are seeking care, you may use family members and/or neighbors as references.
- If you are seeking employment as a caregiver, we typically require references from supervisors, employers, or co-workers. Family members or romantic partners are not adequate references.

It is essential that you notify your references that HomeShare Vermont will be calling them. Please realize that if you have trouble reaching them, we will also have the same trouble, and your application will be delayed.

\* \* \*

1. Reference Name \_\_\_\_\_

Phone Numbers: Day \_\_\_\_\_ Night \_\_\_\_\_

Address \_\_\_\_\_

How long have they known you? \_\_\_\_\_

How do they know you? \_\_\_\_\_

\* \* \*

2. Reference Name \_\_\_\_\_

Phone Numbers: Day \_\_\_\_\_ Night \_\_\_\_\_

Address \_\_\_\_\_

How long have they known you? \_\_\_\_\_

How do they know you? \_\_\_\_\_

\* \* \*

3. Reference Name \_\_\_\_\_

Phone Numbers: Day \_\_\_\_\_ Night \_\_\_\_\_

Address \_\_\_\_\_

How long have they known you? \_\_\_\_\_

How do they know you? \_\_\_\_\_

(Please return this with your application)

# HomeShare Vermont

## SERVICE FEES

Service fees are a necessary component of our funding. Private and public funds are more likely to be forthcoming when program participants can pay their fair share toward homesharing and caregiving services from which they benefit. **Fees are non-refundable.**

**1. Application Fee – \$15 – payable at the time of application.**

**2. Match Fee – payable at time match agreement is signed**

This fee only applies to customers for whom we are successful in finding a match, and is due at the end of the trial period when the match agreement is signed. The match fee is based on a sliding income scale and the number of people in the household (see below). **Hourly Care Giver match fee is always \$10 per match.**

### Household Income –

<u>1 Person</u>	<u>2 People</u>	<u>3 People</u>	<u>Match Fee</u>
< \$14,850	< \$16,950	< \$19,100	\$30
14,851 – 24,700	16,951 – 28,250	19,101 – 31,750	\$50
24,701 – 39,550	28,251 – 45,200	31,751 – 50,850	\$100
39,551 – 54,400	45,151 – 62,150	50,851 – 69,950	\$150
54,401 +	62,151 +	69,951 +	\$275

***No one is denied the services of HomeShare Vermont based on their inability to pay.*** If you are unable to pay at this time, we'll be happy to try to work out a payment schedule with you.

If your match should end unexpectedly within the first 3 months, your paid match fee will be credited in full toward your next match.