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 South Burlington, VT 05403  
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**For office use only**

Date application received \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Ref. sheet received \_\_\_\_\_

**I have a home to share**

**Please Print**

How did you hear about HomeShare Vermont? \_\_\_\_\_

Have you had any past association with HomeShare Vermont? \_\_\_\_Yes \_\_\_\_No

**Contact Information**

**PERSON 1**

Full name \_\_\_\_\_

Other names used \_\_\_\_\_

**PERSON 2 (if applicable)**

Full name \_\_\_\_\_

Other names used \_\_\_\_\_

Mailing address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Physical address (if different) \_\_\_\_\_

Email \_\_\_\_\_ Home phone \_\_\_\_\_

Work phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Best number to call during the day \_\_\_\_Home \_\_\_\_Cell \_\_\_\_Work

**Housing & Income**

Current housing situation \_\_\_\_Rent \_\_\_\_Own \_\_\_\_Other

If renting: Landlord's name \_\_\_\_\_ Phone \_\_\_\_\_

If other, please explain \_\_\_\_\_

How long at current address. Since \_\_\_\_\_ Number of people in the home \_\_\_\_\_

Annual gross household income (Must include all sources of income) \_\_\_\_\_

What pets do you have? \_\_\_\_\_ If a dog, has it ever bitten anyone? \_\_\_\_Yes \_\_\_\_No

**Rent & Service**

Rent you would charge \_\_\_\_\_\$/month \_\_\_\_Not sure

Hours of service you need \_\_\_\_\_Hours/week \_\_\_\_Not sure

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.

**PERSON 1**

Gender: \_\_\_\_\_ Date of birth \_\_\_\_\_ Age \_\_\_\_\_

Ethnicity:  Hispanic  Non-Hispanic

Race: (check all that apply)

White  American Indian/Alaskan Native  Asian  
 Black/African American  Native Hawaiian/Pacific Islander  Other Multiracial

Do you have a disability?  Yes  No Do you receive Medicaid?  Yes  No

**PERSON 2 (if applicable)**

Gender: \_\_\_\_\_ Date of birth \_\_\_\_\_ Age \_\_\_\_\_

Ethnicity:  Hispanic  Non-Hispanic

Race: (check all that apply)

White  American Indian/Alaskan Native  Asian  
 Black/African American  Native Hawaiian/Pacific Islander  Other Multiracial

Do you have a disability?  Yes  No Do you receive Medicaid?  Yes  No

As part of our application process, we do background and reference checks and a personal interview. If you answer yes to any of the questions below, please attach an explanation.

**PERSON 1**

Do you have any motor vehicle violations?  Yes  No

Do you have any pending criminal charges?  Yes  No

Have you had any criminal convictions?  Yes  No

**PERSON 2 (if applicable)**

Do you have any motor vehicle violations?  Yes  No

Do you have any pending criminal charges?  Yes  No

Have you had any criminal convictions?  Yes  No

Other information you want us to know \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*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 understand that providing any false or misleading information will make me ineligible for the services of HomeShare Vermont.*

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

*If completing application for someone else, please complete below:*

Name \_\_\_\_\_ Relationship to applicant \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Mailing address \_\_\_\_\_



# References

Applicant's name \_\_\_\_\_ Date \_\_\_\_\_

HomeShare Vermont asks for references in order for us to try to find the right person for you. 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.

Please notify your references that HomeShare Vermont will be calling them.

### Reference 1

Name \_\_\_\_\_

Daytime phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Email \_\_\_\_\_

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

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

### Reference 2

Name \_\_\_\_\_

Daytime phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Email \_\_\_\_\_

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

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

### Reference 3

Name \_\_\_\_\_

Daytime phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Email \_\_\_\_\_

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

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