



Date: _____

HOMESHARE PROGRAM HOME PROVIDER APPLICATION

19705 Viking Avenue NW, PO Box 1517, Poulsbo, WA 98370 – (360) 229-2503

Name: _____

Maiden or Other Names: _____

Address: _____

Phone Number (1): _____ Phone Number (2): _____

Email: _____

Other members of your household who live with you (If you need more space, write on back):

DEMOGRAPHIC DATA (for program funding purposes only)

Gender: _____ Age: _____ Date of Birth: _____

Race (circle all that apply): White Black/African American Native American/Alaskan Native
 Native Hawaiian/Pacific Islander Asian Ethnicity (circle one): Hispanic Non-Hispanic

Marital status (circle one): Single Married Separated Divorced Widowed

Are you disabled? Yes No Are you a Veteran? Yes No

<u>Name</u>	<u>Gender</u>	<u>Age</u>	<u>Relationship</u>	<u>FT or PT?</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Do you have any pets? N Y How many? _____ What kind(s)? _____

PERSONAL INFORMATION

How did you find out about HomeShare? _____

How long have you lived in Kitsap County? _____

Please list any other counties/states in which you have lived in the past 10 years:

Have you shared housing before (other than with family)? No Yes If yes, was it successful?

Please describe any health conditions which you are willing to disclose and may be important for a housemate to know about (chronic illnesses such as diabetes or heart disease, recent surgeries or hospital stays, etc.):

It is important for you to share information about potentially serious conditions with HomeShare matches so they can be aware of any health concerns and seek help in case of emergency.

Have you ever been involved with Child Protective Services? No Yes

If yes, please explain: _____

Do you currently have a no-contact or protection order against anyone? No Yes

If yes, please explain: _____

Has substance abuse ever been a problem for you? No Yes

If yes, please explain: _____

Have you ever experienced mental health challenges? No Yes

If yes, please explain: _____

Have you ever been convicted of a crime? No Yes

If yes, please explain: _____

YOUR HOME

Location of home to share: _____ Do you own or rent? _____

Landlord name and number (if you rent): _____

(*note: If the home is a rental, the landlord must consent to additional occupants)

About this house (circle one): Single Family Home Duplex/4 Plex Apartment/Condo Mobile

 Accessory dwelling unit/Mother-in-law apartment RV/Trailer

Is a Kitsap Transit bus stop nearby? _____ How far away? _____

Is the home ADA accessible? _____

Please describe location of bedroom(s):

This home share offers:

___ Private bedroom(s)

___ Private living area

___ Private bathroom

___ Private kitchen

___ Private entry

___ Parking

___ Storage

___ Laundry facilities

___ Shared living area

___ Shared kitchen

___ Shared bathroom

___ Shared entry

Furniture provided, if any (please describe):

Rent: \$ _____ Refundable Deposit: \$ _____ Non-Refundable Deposit: \$ _____

Additional Information:

Are you interested in exchanging services for reduced or free rent? No Yes

Which services are you interested in? (please check all that apply)

Meal preparation _____ House cleaning _____ Yard work _____ Driving/Errands _____

Pet care _____ Laundry _____ Grocery shopping _____ Home Maintenance/Repair _____

Childcare _____ Other (describe): _____

Please tell us what applies to you:

Do you drink alcohol? Never Rarely Occasionally Regularly

Would you be okay with a housemate that does this? _____

Do you use cannabis? Never Rarely Occasionally Regularly Edible/topical only

Would you be okay with a housemate that does this? _____

Do you smoke tobacco? No Yes, outside the home only Yes, Inside the home

Would you be okay with a housemate that does this? _____

Do you vape? No Yes, outside the home only Yes, Inside the home

Would you be okay with a housemate that does this? _____

Do you Work? No Yes, outside the home Yes, I work at Home

If you work, what hours do you work? _____

Please check the statements that apply to the person(s) with whom you would consider sharing a home:

Work: Okay if they don't work Work outside the home only Okay if they work in the home

What kind of work hours are okay with you? _____

Female _____ Male _____ Couple _____ Children in home _____ Other _____

Would you consider sharing a home with someone who has pets? _____

If yes, please explain what kind of pets: _____

The following section is an opportunity for you to talk about your likes, dislikes, preferences, and values. This information is confidential and will not be shared, but helps us determine who might be a good match for you.

Please describe your hobbies and interests:

Do you consider yourself introverted, extraverted, or somewhere in between?

Ideally, how much time would you like to spend (i.e., sharing meals, watching TV, playing games) with your home-mate?

Is there anything that you feel very strongly about? (politics, religion, music, food, etc.)

Do you have any pet peeves that might be relevant to shared living? (leaving the lights on, not shutting the door, leaving the toilet seat up, etc.,)

What do you consider to be your best qualities?

What are some of your challenges/things you could improve on?

Is there anything else you would like to share?

REFERENCES

North Kitsap Fishline (NKF) requests three references who are not related to you. If possible, please provide, 1) current or former employer/supervisor, 2) Two personal references. If you have children, please choose personal references who know your children as well. Please inform your references that they will be contacted by NKF.

Current or Former Employer/Supervisor: _____

Title and Name of Company: _____

Dates of employment: From: _____ To: _____

Phone Number: _____ Email: _____

Personal #1: _____ Relationship: _____

How long have they known you? _____

Phone Number: _____ Email: _____

Personal #2: _____ Relationship: _____

How long have they known you? _____

Phone Number: _____ Email: _____

Consent to Criminal Background Check

Participation in North Kitsap Fishline (NKF) HomeShare Program is contingent on a criminal background check. This form must be completed for each adult 18 years and older to participate in the HomeShare program. Criminal history alone does not determine eligibility for HomeShare. However, some crimes may be disqualifying. **This information will be shared with potential home-mates.**

Name:

First _____ Middle _____ Last _____

Other Names/Aliases: _____

Date of Birth: _____ - _____ - _____ Sex: M ___ F ___

SSN: _____ - _____ - _____

Please check one:

I have been a resident of Washington State for the past two years.

I have been a resident of another state at some point during the last two years.

List other states you've resided in the past two years: _____

Please check one:

I declare that I have no criminal history, and no criminal charges are pending against me.

I declare that I do have a criminal history, please explain:

I acknowledge all information that I have provided in this application is true and complete to the best of my knowledge. I authorize North Kitsap Fishline to verify Court, Criminal, & Juvenile Records, and Arrest Detention Information. I understand that providing any false or misleading information will make me ineligible for NKF's HomeShare Program.

Applicant's Signature _____ Date _____



Fishline HOMESHARE PROGRAM

RELEASE OF LIABILITY AND INFORMED CONSENT FOR DISCLOSURE OF RECORDS AND INFORMATION

I, _____ the undersigned HomeShare Program participant, acknowledge and agree to the following:

1. North Kitsap Fishline (NKF) and the HomeShare Program, in accordance with the federal Fair Housing Act and the Washington Law Against Discrimination does not discriminate on the basis of race, creed, color, national origin, sex, sexual orientation, marital status, family status, disability, guide dog or service animal, or military status.

2. North Kitsap Fishline (NKF) obtains information from all HomeShare participants, including home providers and home seekers, and expects all information is true and accurate. NKF is not responsible for ensuring the accuracy of the information. Information obtained about personal preferences regarding another individual for shared housing is confidential and is not used to advertise for potential HomeShare candidates. NKF provides referrals of potential HomeShare arrangements based on the information provided by program participants. It is the solely the responsibility of the individuals to perform their own due diligence and decide whether or not to enter into a HomeShare arrangement. _____

3. All applicants must consent to a check of federal criminal history and WASPC Sex Offender registry in order to participate in the HomeShare program. The presence of a criminal history does not disqualify anyone from participating in the program, nor does the absence of criminal history in any way symbolize endorsement of an individual's character. Criminal history is public information and will be disclosed to potential HomeShare matches for consideration in their personal decision to share a home. _____

4. NKF does not conduct credit checks on individuals for program participation, nor does the program have any income qualifications or restrictions for participation. However, we do require proof of income for the past 30 days from all participants to demonstrate general ability to pay rent. _____

5. Neither NKF nor any staff member is the agent of any HomeShare participant. NKF does provide a list of relevant resources and information to all program participants for their benefit. _____

6. I, the undersigned, acknowledge and agree that the decision to enter into a shared housing agreement with another HomeShare Program participant is my sole responsibility and that the responsibility to verify all information provided either by NKF or the other party rests solely with me. I acknowledge that NKF has encouraged me to verify everything independently. _____

7. I hereby declare that all information included in this application is correct and truthful to the best of my knowledge, and authorize NKF to verify this information should they chose to do so. _____

8. I authorize NKF to share my profile and demographic information as provided in my application with other participants in the HomeShare Program as permitted by law in order to facilitate a match. I further acknowledge that NKF will disclose my contact information to potential matches upon consent as long as I am actively participating in the program. _____

9. I understand that this authorization may be withdrawn at any time by written notification except to the extent that action has already been taken, and that this authorization will otherwise automatically expire with the termination of my participation in the HomeShare Program. _____

I acknowledge that I have carefully read North Kitsap Fishline’s HomeShare Program Description, HomeShare & You ~ A Self-Questionnaire, HomeShare Participation Requirements, and that I have received Post Referral Questions for Home Seekers or the Providers Post Referral Questions to Ask Yourself, and that I have received a list of area Resources. I agree to complete the responsibilities outlined in these documents.

I, the undersigned HomeShare Program participant, hereby waive, remise, release and forever discharge North Kitsap Fishline, the HomeShare Program, its principals, agents, employees, staff, and volunteer workers as and from: any and all claims, demands, damages, actions arising or to arise, now or in the future, by reason of the use of the services or the information provided by NKF to me or any other HomeShare participant; and from any and all claims or demands whatever, in law or in equity, which I, my heirs, my executors, administrators or assigns can, shall or may have, now or in the future, against NKF by reason of the use of NKF’s services or the information provided from or to NKF or from entering into any agreement with another HomeShare participant.

I have read and understood this agreement and agree to be bound by its terms.

Applicant’s signature

Date

Co-Applicant’s signature

Date