



Request for Homeless Priority Status Form

Definition of Homeless Priority Status

You have indicated on your application form that you are homeless, temporarily living with friends or at a shelter.

In order to qualify for "Homeless" status you must be one or more of the following:

- without shelter
- living in temporary or emergency housing
- living in housing condemned by the municipality
- about to be discharged from a care facility without a place to go
- about to be evicted for reasons beyond your control (e.g. landlord wants property for own use)
- burned/flooded out of place of residence

Verification of Homeless status is required, including:

- Completion of the Request for Homeless Priority Status Form AND
- Verification letter of situation from shelter or social agency
- Registration to the Algoma By Name List at ADSAB

The appropriate verification documents must be submitted to the ADSAB along with your housing application office if you wish to be considered for Homeless status.

A letter outlining the circumstances must be provided by a professional/agency.

If you require information or assistance filling out this form please contact ADSAB Housing Services at 1-705-848-7153 or 1-888-326-3133 between 8:30 am to 4:45 pm Monday to Friday.

Section to be completed by Applicant

I, _____ hereby authorize and consent to the completion of this form, its submission and the disclosure of any additional information required to clarify my situation from persons completing this form directly to the ADSAB Housing Services

Applicant Name	Address	Telephone
Signature:		Date:



Request for Homeless Priority Status Form

To be completed by verifier		
<p>A verifier is a person who has a professional relationship with the applicant, including, but not limited to a:</p> <ul style="list-style-type: none"> • doctor • lawyer • shelter worker • law enforcement officer • social worker or social service agency worker • member of the clergy • victim services worker • settlement services worker • community health care worker • counsellor/psychologist <p>Note to person completing this form: Your patient/client has applied for social housing through ADSAB and may be eligible for homeless status since they have declared they are: without shelter, living in temporary / emergency housing due to a lack of housing.</p>		
<p>I have a professional relationship with this client and am eligible to complete this form (As outlined in the list above)</p> <p style="text-align: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>The applicant is currently without adequate shelter</p> <p style="text-align: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>The applicant is currently temporarily living with friends/family</p> <p style="text-align: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>Date Applicant moved into this accommodation: _____</p>		
<p>The applicant is currently staying in an emergency shelter space</p> <p style="text-align: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>Date Applicant moved into this accommodation: _____</p>		
Verifier Name	Organization	Position/Title
Address		Telephone
Signature: _____		Date: _____

Return this completed form and supporting documentation to the:
 Attention of Housing Services - Waitlist

MAIL: Algoma District Services Administration Board (ADSAB)
 2 Elizabeth Walk, Elliot Lake, ON, P5A 1Z3

IN PERSON: Any ADSAB Office

FAX: 705-842-3747