



# Housing Profile

**Instructions:** Use this form to document housing unit preference and household information required to match client to housing opportunities through Home Stretch. Please provide an explanation for any “yes” answers below.

Client Name: \_\_\_\_\_ Client HMIS ID# (if known): \_\_\_\_\_

### Housing Navigator Information

|        |         |
|--------|---------|
| Name:  | Agency: |
| Phone: | E-mail: |

### Household Members: List below all the people that will be living with you

| Name | Age | Gender |
|------|-----|--------|
|      |     |        |
|      |     |        |
|      |     |        |
|      |     |        |

Are you willing to reduce or change the number of people living with you to qualify for a specific housing opportunity?

- Yes       No

### Questions about You and Proposed Members of Your Household

|   | You   | Proposed Member(s) of Your Household  | Please explain any “Yes” answers |
|---|---|---|----------------------------------|
| Is someone in your household a part-time or full-time student?  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Refused | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Refused |                                  |
| Has someone in your household been terminated from Section 8 or a public housing program due to fraud, non-payment of rent, or any type of criminal activity? | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Refused | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Refused |                                  |
| Is there someone <i>without</i> legal immigration status in the United States in your household?  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Refused | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Refused |                                  |
| Is someone in your household required to register as a sex offender?  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Refused | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Refused |                                  |
| Has someone in your household been evicted within the last 7 years?   | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Refused | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Refused |                                  |
| Has someone in your household been convicted of a felony within the past 7 years?   | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Refused | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Refused |                                  |

Contact **HOME STRETCH**

fax: 1 (855) 658-5466, email: [HomeStretch@acgov.org](mailto:HomeStretch@acgov.org), phone: (510) 891-8938

mail: Post Office Box 29172, Oakland, CA 94612

**Please indicate the places in Alameda County where you would be willing to live:**

*NOTE: Choosing more areas that you would be willing to live may increase your available housing options.*

|                                   |                                     |                                     |  |
|-----------------------------------|-------------------------------------|-------------------------------------|--|
| <input type="checkbox"/> Alameda  | <input type="checkbox"/> Emeryville | <input type="checkbox"/> Newark     | <input type="checkbox"/> San Leandro   |
| <input type="checkbox"/> Albany   | <input type="checkbox"/> Fremont    | <input type="checkbox"/> Oakland    | <input type="checkbox"/> Other: _____  |
| <input type="checkbox"/> Berkeley | <input type="checkbox"/> Hayward    | <input type="checkbox"/> Piedmont   | <input type="checkbox"/> Union City  |
| <input type="checkbox"/> Dublin   | <input type="checkbox"/> Livermore  | <input type="checkbox"/> Pleasanton | <input type="checkbox"/> I am willing to live in any part of Alameda County. |

Is anyone from your proposed household earning income from employment?  Yes  No

If so, please write the cities/regions where they are employed: \_\_\_\_\_

**Housing Unit Type**

You will only be matched to housing unit types that you have selected below AND that you qualify for based on the number of people living with you and other criteria. If you're willing to consider a particular type of housing make sure to note this in the questions below.

Which of the following unit types *would you be willing to accept?* (Check ALL that apply)

|   |
|---|
| <input type="checkbox"/> Shared housing (shared bedroom)  |
| <input type="checkbox"/> Shared housing (shared common areas, for example: kitchen, bathroom, etc.) |
| <input type="checkbox"/> Single Room Occupancy (SRO) unit   |
| <input type="checkbox"/> Studio/Efficiency  |
| <input type="checkbox"/> None of the Above  |

**Other Preferences and Needs**

Will you only accept housing that allows for pet(s) to live with you?  Yes  No

Does any member of your household have a condition that *requires* a unit for (check all that apply):

Mobility impairment  Hearing impairment  Vision impairment

\*For any impairment indicated above, client must provide written verification of impairment by a licensed health care professional.

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