

SARA for Women serves women by providing support, advocacy, counselling and shelter for women and their children who have experienced gender-based violence or are at risk of violence.

There are three, short term second stage housing programs offered by SARA for Women: Christine Lamb Residence and Penny's Place, in Abbotsford, and Santa Rosa apartments in Mission.

Women and children who are vulnerable can live safe and stable lives with access to counselling, outreach services, and many unique programs at Christine Lamb Residence in Abbotsford or Santa Rosa apartments Mission. Men 19 years of age and older, are not permitted as visitors to any of our housing programs. Additionally, residents of Christine Lamb Residence and Santa Rosa apartments must be committed to a drug and alcohol free lifestyle.

Penny's Place in Abbotsford is a first-stage housing program that is home to women who may be active in an addiction, experiencing mental health concerns, and/or be street engaged. Each resident has her own room with a locking door and shares common areas of the house. Outreach services and support are provided to the women who live at Penny's Place.

### Please indicate your housing preference

Christine Lamb Residence Abbotsford, BC		Santa Rosa apartments Mission, BC		Penny's Place Abbotsford, BC	
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### Applicant Information

Last Name	First Name	Middle initial	Date of Birth

### Contact Information

Address		
Cell phone	Is it safe to leave a message? <b>Y N</b>	Email
Alternate contact number		Contact person's name and relationship to you

#### For Office Use Only

Date Received \_\_\_\_\_ Unit Size Required \_\_\_\_\_

### Children Information

Last Name	First Name & Initial	Date of Birth	Age	Gender

If children do not live with you 100% of time, please provide the following information:

Name	# of days/week	Do you have a custody agreement? If so, what are the terms?

Do you expect your family size to change within the next 12 months (birth of child, back to care plan, etc.)? If yes, please describe.

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### Income and Assets

Source of Income (employment, EI, income assistance, pension, etc.)	Amount Received each month
	\$
	\$
	\$
<i>Total Monthly amount</i>	\$
Value of Assets	
<i>Vehicle</i>	\$
<i>Savings/RRSP</i>	\$
<i>Property or other assets</i>	\$

**Residency History**

Please describe your current and/or most recent housing situation.

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**Victim of Violence Information**

Are you currently fleeing domestic violence or abuse?	<i>Y</i>	<i>N</i>
Are there any no contact orders in place?	<i>Y</i>	<i>N</i>
Have you experienced any form of violence or abuse?	<i>Y</i>	<i>N</i>
Have your children witnessed or experienced violence or abuse?	<i>Y</i>	<i>N</i>

What concerns do you currently have regarding your safety and/or your children's safety?

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Do you have any outstanding warrants? If yes, please provide details.

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**Substance Use Information**

Do you currently, or have you previously struggled with substance misuse?	<i>Y</i>	<i>N</i>
Substance of choice:		
Clean time:		

If you have attended a treatment program, please provide details.

Date	Program Name	Completed Y/N

Are you on the Methadone Maintenance Program	<i>Y</i>	<i>N</i>
Length of time on program:	# of mls prescribed:	

Are you currently accessing treatment, support and/or counseling? If yes, please explain.

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## Health Information

Do you or your children have any chronic health conditions? If yes, please provide details including medications.

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Do you or your children have any mobility issues? If yes, please describe.

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Please describe your overall mental health.

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Do you or your children have a mental health diagnosis? If yes, please explain.

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## Support Team Information

Doctor:	Phone:
Counsellor:	Phone:
Mental Health Worker:	Phone:
Social Worker:	Phone:
Probation/Parole Officer	Phone:
Other:	Phone:

What types of support/services, which you have used in the past, have been most helpful for you?

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Have you accessed or are you currently accessing other support services offered by SARA for Women? If yes, please describe.

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Participation in support groups, counselling and/or programs is required while residing at a SARA for Women housing program. Will this be a problem for you? If so, please explain.

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I declare that this is my application, and all information included is true to the best of my knowledge.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

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Fax completed applications to 604.746.4201

Applicants must call once each month to keep their housing application active and up-to-date.  
604.746.4200

We will fill vacancies in accordance with Canadian National Occupancy Standards.