

Prescreen - Eligibility Form

Return to pphousing@ywcaworks.org or Fax: 425-392-2160

Date: _____ Name: _____ DOB: _____

Phone: _____ Email: _____

Alt. Contact: _____

Ethnicity/Race: _____ Disability: _____

Reunification Details:

Current CPS Case When did the case open? _____ History of CPS _____

Yes

No How many children do you have? ____ How many are you trying to reunify with? ____

Where are the children living currently? _____ What is the Reunification Plan? _____

What are the names and ages of your children? _____

Do you have legal custody or a current parenting plan? _____

What do you need to complete for Reunification? _____

Criminal History:

Have you ever been convicted of a Class A Felony including but not limited to: a sexual offense, a crime against a child, arson, manufacturing of methamphetamine or any violent crimes? _____

If there are any felony convictions for these offenses, this prospective resident is not eligible for Passage Point.

Have you been incarcerated in the last year? _____ If yes, where? _____

Are you on DOC or Supervision? _____ For how long? _____

What is your probation officers name/ which office? _____



Housing Details:

Do you know any other residents who live at Passage Point? _____

How did you hear about Passage Point? _____

Current Housing Situation: _____ Current Annual Income: _____

What are your housing options at release and/or back up plan? _____

Do you have any evictions on your record? _____ Owe any money to Public Housing? _____

Have you rented an apartment before? _____ Where do you want to live after this program? _____

What are your future career goals? _____

Services:

What services do you need to attain for your goal of reunification? What services would you like to complete? What about goals for market rate housing, careers, health, and/or living the life you want? Who are your supports? What is your plan to stay sober and build self-sufficiency skills?

Are you open to services including but not limited to the following:

- | | |
|--|--|
| <input type="checkbox"/> Mental Health / Children’s Mental Health | <input type="checkbox"/> Psychiatry / Medication Management |
| <input type="checkbox"/> Chemical Dependency / Sober Supports | <input type="checkbox"/> Housing Education / Positive Rental History |
| <input type="checkbox"/> Financial Planning / Budgeting | <input type="checkbox"/> School System Navigation – IEP / 504 |
| <input type="checkbox"/> Building Healthy & Strong Support System | <input type="checkbox"/> Healthy Relationships |
| <input type="checkbox"/> Parenting Classes / Parent Support Groups | <input type="checkbox"/> Family Programming |
| <input type="checkbox"/> NA / AA / Celebrate Recovery | <input type="checkbox"/> Setting Boundaries |

Please leave a copy with the applicant if possible.

SCREENING CRITERIA

- Household must meet the King County definition of homeless at time of move in:
A homeless person or household is someone who, on a particular day or night, does not have decent and safe shelter or sufficient funds to purchase a place to stay. This includes people who can provide proof of imminent housing loss or who are currently residing in homeless shelters or transitional housing
- Ten (10) units are set aside for those who identify as being disabled.
“DISABILITY” means: A physical or mental impairment that substantially limits one or more of the major life activities of an individual, such as not being able to care for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, or learning.
- Household size cannot exceed King County Housing Authority occupancy standards: (1 bedroom = 3 persons max; 2 bedroom = 5 persons max)
- Applicant must qualify for King County Housing Authority Project Based Subsidy.
- Applicant must meet income eligibility per the WSHFC Tax Credit Program.

TARGETED POPULATION

- This program prioritizes people released from incarceration in the past 12 months or similar programs to prevent incarceration.
- This program is targeted towards applicants that have a child or children under the age of 18 years and have a reasonable chance to reunite with that child or children.
- Applicant is being released in King County or has strong reasons for attachment to King County, such as children who reside there.

IDENTIFICATION

- Valid Photo Identification or birth certificate will be required of all applicants age 18 or over
- Valid Social Security Card will be required for all household members, unless household qualifies under Citizenship Policy

CITIZENSHIP POLICY

- At least one household member must have Social Security Number/Card for household to be eligible
- Must provide proof of social security number
- Work Visa or Green Card would be acceptable for all other household members

FALSIFICATION OF APPLICATION

- Verify accuracy of information provided

- In all other cases, no exceptions

CRIMINAL CONVICTIONS RESULTING IN AUTOMATIC DENIAL

- Any class A felonies
- Any crimes against a child, manufacture of methamphetamines, violent crimes, crimes of a sexual nature and arson.

Screening Medium:

- The MOCO application and Washington State Patrol (WATCH) background check.
- Round table interview with the services team interview/ Agreement and engagement to suggested services
- Approval from KCHA

Serious Violent Offenses as defined by RCW 9.94A.030(41):

- Murder in the first degree
- Homicide by abuse
- Murder in the second degree
- Manslaughter in the first degree
- Assault in the first degree
- Kidnapping in the first degree
- Rape in the first degree
- **Arson (1st or 2nd Degree) as defined in RCW 9A.48.020 and 030**
- **Sex Offense as defined in RCW 9.94A.030(42)**
- **Convictions of methamphetamine and/or drug production**

Overall process can take 2-6 weeks

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empowering women**
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