



AREA 1
Agency on Aging
Northcoast Homeshare

For A1AA use only

Date application received ___/___/___

Ref. sheet complete incomplete

Guest Application

How did you hear about Northcoast Homeshare?

Date housing needed _____

Any past association with A1AA? NO YES: what kind? _____

Interest in Specific Room (as appropriate) _____

www.a1aa.org/homesharing/available-rooms/

Contact Information Full name _____

Mailing address _____

City _____ State _____ Zip _____

Physical address (if different) _____

Email _____ Home phone _____

Cell phone _____ Best number to call ___ Home ___ Cell

OK to text? NO YES

Preferred Location, Rent Budget, Services, Pets & Transportation

Arcata area ___ Eureka area ___ McKinleyville ___ SoHum ___

Fortuna ___ Trinidad ___ Del Norte ___ No preference ___

Max. rent amount you wish to pay: \$_____/mo. Utilities? included / \$____

Max. number of hours of service you can provide: up to _____hrs/wk ___ Not sure

_____ None: I prefer to only pay rent

List all pets: _____ if a dog, has it ever bitten anyone? NO YES

I have a car and I can drive _____ I need to be near a bus line _____

General Information

Have you ever shared housing? (other than with immediate family) YES NO

How was that experience? _____

How long have you lived in the area? _____

Where have you lived before? _____

Are you a homebody or active outside the home? _____

Describe your ideal housemate: _____

For reporting and statistical purposes, our funders require that we ask for the following information. If you do not wish to give your information, you may skip this section.

Gender identity _____ Sexual Orientation _____

Sex at Birth _____ Date of birth _____ Age _____

Ethnicity: ___ Hispanic ___ Non-Hispanic

Race: (check all that apply)

___ White ___ American Indian/Alaskan Native ___ Asian ___ Other Multiracial

___ Black/African American ___ Native Hawaiian/Pacific Islander

Do you have a disability? YES NO

As part of our application process, we perform background and reference checks and conduct a personal interview. If you answer YES to any of the questions below, please provide an explanation.

Do you have any motor vehicle violations? YES NO

Do you have any pending criminal charges? YES NO

Have you had any criminal convictions? YES NO

Have you ever been evicted? YES NO

If yes to any of these questions, please explain _____

Other information you want us to know _____

Housing History

Current housing situation ___ Rent ___ Own ___ Other (explain)

How long at current address? Since _____

Current landlord's name _____ Phone _____

Previous housing situation ___ Rent ___ Own ___ Other (explain)

How long at previous address? From _____ To _____

Address _____ City _____ State _____

Previous landlord's name _____ Phone _____

Service Information

Which of the following services would you be willing to provide? (Check all that apply)

Cooking meals (meals/wk) _____ Sharing meals _____

Do you have any food allergies or require accommodations with food/in the kitchen?

Errands/Grocery shopping _____ Computer help _____ Lawn/garden work _____

Driving homeowner's car _____ Driving own car _____ Changing a bed _____

Visiting/Engaging in Conversation _____ Doing Laundry _____ Pet care _____

Home Information: What would you require?

Nr. of Bedrooms _____ Accessibility _____ Parking (type) _____

Bathroom *private / shared OK* Laundry facilities *in unit / on site / off site OK*

Do you wish to bring your own: Bed: NO YES: size _____ Desk _____

Lamp _____ Dresser _____ Other furniture: _____

Will you bring large items that need storage? (kayaks, bikes, snowboard, etc.) NO YES:

Would you live with someone who has pets? NO YES (what kind): _____

Do you own guns or other weapons? NO YES: where/would you keep them while homesharing? _____ Are they legally registered? NO YES

Do you want cable TV and/or internet service? NO YES: Would you be willing to pay if not currently available in the home? _____

Employment History / Current Income

***Current position/title _____

Full-time _____ Part-time _____ Retired _____ Unemployed _____ Student _____ Other _____

Employer _____

City/State _____ Date of hire _____

***Previous employer _____

Position/Title _____

Full-time _____ Part-time _____ Dates employed: from _____ to _____

City/State _____

***CURRENT annual gross household income (\$/year) _____

Other Information

Would you let your homesharer know about your comings & goings? NO YES

Will you be spending time away? (Vacations, weekends, housesitting, etc.?)

Will you have guests? (Check all that apply) Daytime ____ Overnight ____

Evening ____ Romantic Overnight ____ How often: _____

Do you smoke? NO YES If so, indoors or outdoors? _____

Would you live with a smoker? NO YES

Do you grow cannabis? NO YES

Do you use cannabis products? NO YES: do you do so at home? NO YES

YES: for medicinal purposes only _____ also for recreational purposes _____

How do you consume cannabis: smoke, vape, edibles, tinctures, other: _____

Would you live with someone who uses cannabis in the home? NO YES

How often do you drink? (Check one) ____ Never ____ Once a year

____ Once a month ____ Once a week ____ Daily

Would you live with someone who drinks? NO YES

How do you identify politically? ____ Far Left ____ Far Right ____ Moderately Left

____ Neutral ____ Moderately Right ____ N/A

Would you be willing to live with someone who does not share the same ethnicity,
social and/or political views? NO YES

I hereby acknowledge that all the information I have given in this application is true and complete to the best of my knowledge and belief. I understand that providing any false or misleading information will make me ineligible for the services of Northcoast Homeshare.

Signature _____ Date _____

**I am ready to find my
home sharing partner!**

Applicant's name _____ Date __/__/____

All references should be people who have known you at least 1 year. Together, the references should cover a span of at least the last 5 years to the present. Please notify your references that Area 1 Agency on Aging will be calling them. References should not include family members or romantic partners.

Reference 1

Name _____

Daytime phone _____

City _____ State _____

Email _____ Relationship _____

How long have they known you? _____

Reference 2

Name _____

Daytime phone _____

City _____ State _____

Email _____ Relationship _____

How long have they known you? _____

Reference 3

Name _____

Daytime phone _____

City _____ State _____

Email _____ Relationship _____

How long have they known you? _____