

## **Saint Louise House**

We invite single mothers facing housing instability who are ready to set goals and put in the work to achieve long-term stability to apply for our program. At Saint Louise House, moms will work with an Empowerment Partner through weekly case management to reach the goals they set for themselves. The goals are centered around education, employment, parenting, legal matters, finances, and health that will help them work toward permanent housing and economic stability. Saint Louise House offers stable housing to families who join the program.

## We are not an emergency shelter and typically have a waiting list.

Copies of the following documents will be requested when we reach the applicant's name on the waitlist:

- Proof of Income
- Proof of Enrollment in School (if applicable)
- Valid Photo ID (Driver's License, State Identification, Passport)
- Birth Certificates
- Social Security Cards for mother and children (if applicable)
- Immunization records for each child (immunizations are required unless there is a documented medical need for a delayed or restricted vaccination schedule)

After the initial interview, applicants being considered for a second and final interview will be required to complete:

- Criminal Background check
- Observed drug test

Applicants invited to join the Saint Louise House program will be required to complete the following before moving into an apartment:

- Sign a month-to-month lease (previous rental debt and evictions will not affect eligibility)
- Pay \$100 security deposit and first month's rent at lease signing
- Provide verification of Austin Energy electric service established in applicant's name

## Application Submission Instructions

Please complete this application and send it to:

admissions@saintlouisehouse.org

Or to: Saint Louise House P.O. Box 150637 Austin, TX 78715 For more information text 512-346-2248 to schedule a phone call.

Please answer the following questions about eligibility:
Are you a single mom over the age of 18 currently experiencing housing instability?   Yes No
Do you have custody of at least one child? Yes No
How many children will be living with you? 1-4 5+
We are unable to accommodate families with more than 4 children.
Are any of the children who will be living with you in High School (9 <sup>th</sup> – 12 <sup>th</sup> grade)?
We are unable to accept families with children who have already entered high school.
Are you able and willing to work full-time OR attend school full-time and work part-time?
Are you able and willing to participate in weekly case management?
Are you willing to complete a background check and a drug test?  Yes No
Are you able to establish utilities through Austin Energy in your name? Yes No
If offered a spot at Saint Louise House, applicants will be asked to sign a Program Agreement and Lease that
include the following Housing Guidelines:
<ul> <li>Only individuals on the lease can live in the apartment.</li> <li>Visitors outside of visiting hours are not allowed.</li> <li>Visitors must be always accompanied by clients.</li> <li>No drugs or alcohol allowed on property.</li> <li>No smoking is allowed on property.</li> <li>Pets are not allowed on property.</li> </ul>
Are you able and willing to follow the Housing Guidelines listed above?   Yes No
Referral Information
What agency or person referred you to Saint Louise House?
If it was an agency, who is your contact person there?
What is their phone number?
How long have you received services from this agency?

## **Application**

Personal Information			
First Name	Last Name		Date:
Preferred Name/Nickname:			
SSN	Date of Birth	Age	
Contact Number	E-mail	Address	
What is your primary language?			
Ethnicity Hispanic or Latino	Non-Hispanic or	Non-Latino	
Race (check all that apply)			
American Indian or Alaskan Na	tive Asian		
Black or African American	Native H	awaiian or Other Pacific Islaı	nder
White	Other		
What do you hope to accomplish b	y being in a program l	ike Saint Louise House?	

Children Information (Limit: 4 Children)			
Are you currently pregnant? Yes No I don't know			
If yes, when is your due date?			
Child 1			
Name Age			
Preferred Name/Nickname: Gender: Male Female Non-Binary			
Social Security Number Date of Birth			
Ethnicity Hispanic or Latino Non-Hispanic or Non-Latino			
Race (check all that apply)			
American Indian or Alaskan Native Asian			
☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander			
☐ White         ☐ Other			
Will this child be living with you? Yes Do Unsure			
Do you have legal custody of this child?			
Does this child have consistent childcare? Yes No If yes, where? (If school, which school?)			
Child 2			
Name Age			
Preferred Name/Nickname: Gender: Male Female Non-Binary			
Social Security Number Date of Birth			
Ethnicity Hispanic or Latino Non-Hispanic or Non-Latino			
Race (check all that apply)			
American Indian or Alaskan Native Asian			
☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander			
☐ White         ☐ Other			
Will this child be living with you? Yes Unsure			
Do you have legal custody of this child? Yes No Unsure			
Does this child have consistent childcare? Yes No If yes, where? (If a school, which school?)			

Child 3					
Name	Age				
Preferred Name/Nickname:	Gender: Male Female Non-Binary				
Social Security Number	Date of Birth				
Ethnicity Hispanic or Latino Non-Hispanic or Non-Latino					
Race (check all that apply)					
American Indian or Alaskan Native	Asian				
Black or African American	Native Hawaiian or Other Pacific Islander				
White	Other				
Will this child be living with you? Tes	No Unsure				
Do you have legal custody of this child?	Yes No Unsure				
Does this child have consistent childcare?	Yes No If yes, where?(If a school, which school?)				
Child 4					
Name	Age				
	Age Gender:				
Name					
Name Preferred Name/Nickname:  Social Security Number	Gender: Male Female Non-Binary				
Name Preferred Name/Nickname:  Social Security Number	Gender: Male Female Non-Binary  Date of Birth				
Name Preferred Name/Nickname:  Social Security Number  Ethnicity Hispanic or Latino Non-Hi	Gender: Male Female Non-Binary  Date of Birth				
Name Preferred Name/Nickname:  Social Security Number  Ethnicity Hispanic or Latino Non-Hi  Race (check all that apply)	Gender: Male Female Non-Binary  Date of Birth  Spanic or Non-Latino				
Name Preferred Name/Nickname:  Social Security Number  Ethnicity  Hispanic or Latino Non-Hi  Race (check all that apply)  American Indian or Alaskan Native	Gender: Male Female Non-Binary  Date of Birth  spanic or Non-Latino  Asian				
Name Preferred Name/Nickname:  Social Security Number  Ethnicity Hispanic or Latino Non-Hi  Race (check all that apply)  American Indian or Alaskan Native  Black or African American	Gender: Male Female Non-Binary  Date of Birth  spanic or Non-Latino  Asian  Native Hawaiian or Other Pacific Islander				
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Name  Preferred Name/Nickname:  Social Security Number  Ethnicity  Hispanic or Latino  Non-Hi  Race (check all that apply)  American Indian or Alaskan Native  Black or African American  White  Will this child be living with you? Yes	Gender: Male Female Non-Binary  Date of Birth  Spanic or Non-Latino  Asian Native Hawaiian or Other Pacific Islander Other No Unsure  Yes No Unsure				

Education			
Please check the highest level of education you have completed.			
High school diploma Did not complete high school			
GED Some college Name of School & Field of Study:			
Vocational school Name of School & Field of Study:			
College degree Name of School & Field of Study:			
Are you currently in a school or training program? Yes No			
If yes, what is the Name of School & Field of Study?			
Employment			
Are you currently employed?			
If not employed, what are the barriers to finding and maintaining employment? (Check all that apply.)			
☐ Transportation ☐ Childcare ☐ No resume ☐ Physical health/Mental health			
☐ No work history ☐ Criminal history ☐ Education ☐ Immigration status			
History of drug/alcohol abuse Other			
Current or Most Recent Employer:			
Employer: Position: City, State			
When did you start this job?   Full-Time Part-Time			
When & Why did you leave this job?			
Previous Job 1			
Employer: Position: City, State			
When did you start this job?			
When & Why did you leave this job?			
Housing			
What is your current living situation?			
Place/Address:			
When did you move in? How much is the rent? Who pays the rent?			
Do you have a lease? Yes No If yes, who is on the lease?			

Prior Living Situation 1				
Place/Address				
When did you move in? When did you move out?				
Who was on the lease? How much was the rent?				
Who paid the rent? Why did you leave?				
Have you ever been evicted? Yes No I don't know				
Do you have any rental debt? Yes No I don't know				
Please list any other housing programs you have applied for and status:				
Are you on the Housing Authority of the City of Austin (HACA) public housing wait list? Yes No				
If yes, then what number are you on the wait list?				
Do you have a housing voucher? Yes No				
Are you on any Section 8 wait lists? If so, which ones?				
Legal				
Do you have any current/pending legal issues (i.e., divorce, child custody, child support, probation, etc.)?				
Yes No I don't know				
Are you currently involved with Child Protective Services? Yes No I don't know				
Have you ever been arrested? Yes No I don't know				
Are there any warrants out for your arrest?				
Have you ever been convicted of a misdemeanor?  Yes No I don't know				
Have you ever been convicted of a felony?				
Are you on probation? Yes No I don't know				
Are you on parole? Yes No I don't know				
Have any of your children living with you been arrested or convicted of a crime?				
Yes No I don't know				

Substance Use History				
Do you have a history of using drugs or alcohol? Yes No				
Have you ever received treatment for drug use? Yes No Currently receiving treatment				
Estimated date of last drug use:				
We are unable to accommodate applicants who have experienced less than 6 months of sobriety.				
Emergency Contact				
Emergency Contact Name: Phone Number:				
Emergency Contact Relationship to You:				
Benefits and Other Income				
Do you receive Child Support?				
Yes No				
Do you receive benefits? (check all that apply)				
SNAP WIC TANF SSI/SSDI Other:				
If you do not receive benefits, would you like to meet with our staff to apply?				
What type of healthcare coverage do you have? (check all that apply)				
None MAP Medicaid CHIP Private Insurance Other:				
What type of healthcare coverage do your children have? (check all that apply)				
MAP Medicaid CHIP Private Insurance Other:				
Children do not have health care coverage				
Which Medicaid provider?				
☐ Dell Children's Health Plan ☐ Superior ☐ Blue Cross Blue Shield ☐ Other: ☐ Unsure				
What is your primary form of transportation? (Car, Bus, Uber, Friend/Family,etc.)				
Submission Acknowledgment				
I understand that after I submit my application, I will set up a meeting with Saint Louise House staff to				
review my responses and talk about the application and waitlist process.  Yes				
I understand that I will have to check in with Saint Louise House every month to maintain my spot on				
the waitlist. If I do not maintain monthly contact with Saint Louise House, I will be forfeiting my place on				
the waitlist and will be required to re-apply.   Yes				

Saint Louise House and the City of Austin/Austin Housing Finance Corporation do not discriminate on the basis of disability in the admission or access to, or treatment or employment in, its programs and activities. Dolores Gonzalez has been designated as the City's Section 504/ADA Coordinator. If you have any questions or complaints regarding your Section 504/ADA rights, please call her at 974-3256 (voice) or 974-2445 (TTY).

Saint Louise House and the City of Austin/Austin Housing Finance Corporation are committed to compliance with the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act of 1973, as amended. Reasonable modifications and equal access to communications will be provided upon request. Please call 472-6882 (voice) or Relay Texas at 1-800-735-2989 (TDD) for assistance.

This publication is available in alternative formats. Please call 974-3110 (voice) or 974-3102 (TDD) for assistance.

