

## **WeShine Parkrose Community Village Guest Application**

At our Parkrose Community Village, we serve adults who identify as LGBTQIA+ (sexual and gender minorities), prioritizing those who are also Black, Indigenous, or People of Color and/or female or female-identified. WeShine Villages are low-barrier. Each applicant will be considered on an individual basis regardless of their background or current struggles/challenges.

against COVID-19 and abide by Oregon Health Authority guidelines regarding masking and social

All staff, guests, service providers, and volunteers must show proof of vaccination/booster

distancing. Pronouns: \_\_\_\_\_\_ Preferred Nickname: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Message Phone/Name: Emergency Contact: Date of Birth: Age Range: Circle One 18-24 25-34 35-44 45-54 55-64 65+ Language(s) Spoken: \_\_\_\_\_ Language (s) Read/Written: Gender Identification:\_\_\_\_\_ Sexual Orientation: \_\_\_\_\_ Racial Identification: Ethnic Identification: Do you have documentation of COVID 19 Vaccinations/Boosters: Are you currently fleeing from domestic or interpersonal violence? \_\_\_\_\_\_ Where are you currently staying/camping? \_\_\_\_\_ How did you hear about WeShine? \_\_\_\_\_

Please provide names of any social service agencies, caseworkers, housing advocates, peer support, primary care provider, or counselor you are currently working with. Service Provider **Email Address** Phone Are you on any housing waitlists?  $\square$  Yes  $\square$  No. If yes, with what agencies or buildings? \_\_\_\_\_\_ **Background Information** Are you a Veteran? \_\_\_\_\_ Dates of Service \_\_\_\_\_to\_\_\_ Branch Do you have a DD-214? Is this your first experience with being unhoused?  $\square$  Yes  $\square$  No How long have you been unhoused? Years Months How did you become unhoused?\_\_\_\_\_ What city and state were you living in when you became unhoused? How long have you lived in Multnomah County? Years \_\_\_\_\_ Months \_\_\_\_\_ How long have you lived in Portland? Years \_\_\_\_\_ Months \_\_\_\_\_ Do you have family, friends or other close ties to the Portland area?  $\square$  Yes  $\square$  No If yes, please describe:



Do you have any of the following? check bo	x if 'yes'
☐ Health Insurance	
If yes, please name and provide policy num	ber:
Vehicle	
If yes, please provide the following informa-	tion:
Vehicle Make & Model:	
Vehicle License Plate:	
Vehicle color and style:	
	rk your vehicle next to a WeShine village. No one
may live in or stay in a vehicle parked on the	nis property.
☐ Drivers License	
Number: State:	
☐ Vehicle Insurance	
If yes, please list carrier:	
What is your current insurance policy expir	ation date?
$\square$ Is the vehicle working and driveable?	
Do You Have:	
☐ State ID	
If yes, list state, number and expiration date	<u>.                                    </u>
☐ Birth Certificate	
If no, what state were you born in?	
☐ SNAP benefits/Food stamps	
Do you have a pet? $\square$ Yes $\square$ No	
If yes, tell us about your pet:	
	Is your pet spayed/neutered?
Does it have a license and/or shots?	
Is it house-trained?	

\*Note: Pets must be screened to be sure they are not aggressive towards other people or animals and will not be accepted automatically into the village. Villagers will be required to keep their animal under good control, to use designated pet areas, and to clean up after them. Only one animal is allowed per sleeping pod.



Do you have any <u>addiction</u> or <u>mental health challenges</u> ? $\square$ Yes $\square$ No
If yes, please describe:
Do you have any <u>learning disabilities</u> , need help with <u>reading or writing</u> , or <u>remembering things</u> ? If yes, please describe:
Do you have any <u>physical limitations</u> or <u>medical conditions</u> ? If yes, please describe:
Do you take any <u>prescription medications</u> ? $\Box$ Yes $\Box$ No If yes, what do you take them for? (Be prepared to show the medication bottles/containers.)
Are you currently on parole or probation? $\square$ Yes $\square$ No If yes, please provide the name and contact info for your probation/parole officer:
Do you smoke tobacco or marijuana?  *Note: smoking will only be allowed in designated outdoor smoking area.  Do you drink alcohol or use any illicit drugs? ☐ Yes ☐ No  If yes, please specify. Addiction to drugs or alcohol will not automatically prevent you from being admitted to a WeShine Village. However, open use and/or drug dealing or distribution will not be allowed within the Village or the property the Village sits on.  Have you ever been evicted from a village, congregate shelter, housing or treatment program?
☐ Yes ☐ No If yes, provide dates and reasons for evictions:
What steps have you taken since then to address the issues/behavior that caused you to be evicted?



Have you ever lived in a self-governing community?  If yes, what do you think makes a self governing community work well for all?	
What do you think makes such a village not work well for all?	
Income Information:	
Do you currently receive any income from employment? $\square$ Yes $\square$ No	
If yes, how much? \$/mo.	
Do you currently receive any other income? $\square$ Yes $\square$ No If yes, \$/mo. If yes, what is the source of other income? (Disability, Social Security, Worker's Comp, picking cans, odd jobs, family help, etc.)	չ up 
Additional Information: This is a space for you to add any information you would like us to know about you.	
Applicant Signature: By signing below you are stating that the information you have provided is factual and comp to the best of your knowledge.	olete
Signature Date	



## **Next Steps:**

- 1) Complete the application. Answer every question as fully as you can. It is ok to ask someone to help you fill out the application. After you finish the application you can do one of the following:
  - Drop your application off in the box mounted by the gate on the outside of the turquoise fence at **12505 NE Halsey Blvd.**
  - Mail it to: WeShine, 3439 NE Sandy Blvd. # 525, Portland, OR 97232.
  - Email it to: info@weshinepdx.org.
  - Call our intake specialist at 971-710-3676 to ask questions or arrange to meet them at the village for an interview and a tour.
- 2) Make a copy or send a photo of your up-to-date COVID vaccination and boosters, if required by OHA. If needed, you can text these to either of the cell phone numbers listed above. If you need help to make a copy of your COVID card, a staff member can help you. We can also help you find a place to get a vaccination or booster shot if needed. These shots are free and are available at a number of close-by locations.
- 3) Make arrangements to meet with a Parkrose Village staff member. They will give you a tour of the village. They will also review our *Good Guest Agreement* with you to be sure you understand what is expected of you as a Village Guest. You will be required to sign this Agreement before you can move in. We will also arrange for you to meet with a couple of our current villagers, so they can ask you some questions, too.
- 4) If you have a pet, you will need to provide information about the pet and bring it to the Village when you have your interview to meet with other pets and villagers.
- 5) Once you are accepted to the village, a staff member will help you make plans to move in. You will be limited to bringing 3 medium-sized garbage bags of personal belongings to your pod.
- 6) For your first 60 days, you will be on a trial basis in the village. At the end of 60 days you will be interviewed by the Village Intake Committee. If you are not approved to stay beyond the initial trial period, you will be required to move out within 7 days of this interview.