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## APPLICATION INFORMATION FOR A PLACE AT EMMAUS GREENWICH

Based in Plumstead, South East London, Emmaus Greenwich is a different concept in services for homeless people. Here, people come together to live as a community– becoming “companions” when they join us. The Community is made up of 33 men and women who come from all over the UK and beyond.

In joining us though, everyone must agree to:

- Engage fully in the Emmaus Greenwich social enterprise and participate in Community activities
- Sign off state benefits
- Abide by the rules of no drugs or alcohol on the Emmaus Greenwich site
- Respect other people

The application criteria for Emmaus Greenwich is as follows:

- To be over 18
- To be either homeless or at risk of becoming homeless, or to have been referred by another project catering for the same
- To be off illegal drugs
- Not dependent on alcohol
- To be able and willing to fully participate in community activities
- To be willing to sign off benefits (except for housing benefit)
- To be able and willing to claim housing benefit (unless they are applying for a ‘solidarity’ place)
- Not to have a serious mental health problem
- To be able to live in Community and fit in with its current composition
- To have sufficient independence to cope with periods where there are no staff present
- To be willing to live by our rules
- To want to make a contribution

We provide comfortable single rooms, all food, a toiletries allowance and holiday & travel allowance. We provide a weekly charitable allowance of £37 with an additional £8 being put into a “leaving fund”. Each companion is linked with a 1:1 worker and together they agree a support plan to address specific issues and allow personal development, as well as set a tailored plan for the future.

Emmaus Greenwich is not a homeless hostel and the community living aspect along with the strict rules regarding alcohol and drugs mean that this is not an option appropriate for everyone. We can accept people who have no active addictions and low support needs. However, we only work on a referral basis so it is essential that full details are provided on the attached form including the contact details of all those who are, or have been, involved in the support of the applicant. Please also ensure that the consent form is signed by the applicant to allow information on the form to be confirmed by contact with agencies and people included on the application form. It is only then that we are able to carry out a full assessment and proceed to the interview stage of the application, with a visit to Emmaus Greenwich.

We are currently accepting referrals for consideration, so please complete the attached form and return it to us. Alternatively, if you have any questions, please do not hesitate to contact us and we will be happy to help.

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# EMMAUS GREENWICH COMMUNITY

## APPLICATION FORM

*All information provided will be treated with respect and will be held in strictest confidence, subject to the Data Protection Act 1998 and the Emmaus Data Protection Policy (available on request)*

**NAME:**

**DATE:**

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<b>DATE OF BIRTH:</b>		<b>AGE:</b>	
<b>GENDER</b>	<b>MALE</b> <input type="checkbox"/>	<b>FEMALE</b> <input type="checkbox"/>	
<b>NATIONAL INSURANCE NO:</b>			
<b>CONTACT ADDRESS:</b>			
<b>CONTACT NUMBERS (INCLUDING MOBILE):</b>			

### REFERRER'S DETAILS

<b>NAME:</b>	
<b>POSITION:</b>	
<b>AGENCY:</b>	
<b>CONTACT ADDRESS:</b>	
<b>CONTACT NUMBERS (INCLUDING MOBILE):</b>	
<b>EMAIL:</b>	

*Please be as honest as possible when answering the following questions. The information we gather is not to be prejudice against you. We mean to use it to help support you better.*

**IF CURRENTLY IN PRISON – PLEASE STATE WHICH PRISON, ID NUMBER AND RELEASE DATE:**

**IF RECENTLY RELEASED FROM PRISON – PLEASE STATE WHICH PRISON, RELEASE DATE, DETAILS OF LICENCE PERIOD AND PROBATION INFORMATION:**

**HOUSING/HOMELESSNESS HISTORY:**

**YOUR STORY.....**

Please give a brief account of your life history up till this point. How did you become homeless? Where have you lived? Problems/issues that have arisen in the past?

Have you lost accommodation in the past? Please give details:

What is your country of birth? \_\_\_\_\_

If you haven't always lived in the UK, please state how long you have been in the UK:

\_\_\_\_\_

Have you ever been known by another name? YES/NO

If yes please detail other known name/s \_\_\_\_\_

Name changed by deed poll? YES/NO

Are you eligible to receive housing benefit: YES/NO

***You must be able to receive housing benefit in order to reside at Emmaus Greenwich.***

If you are not eligible to receive housing benefit, please state reasons why and your current situation to include information with regards to any appeals made/ongoing:

Are you currently receiving any benefits, state or private pensions: YES/NO

If answering yes, please give details here

Have you ever lived in an Emmaus Community? YES/NO

If answering yes, please give information regarding which communities and dates and reason for leaving:

Please list any Emmaus Communities that you have applied to including dates of application:

**DRUG HISTORY:**

Have you had, or still have problems with drugs?      YES/NO      If answering No, please go to next section.

What drugs do you currently use? How much/How often?

What drugs have you previously used? (please include any 'Legal Highs') When/ how much/How often?

If not currently using drugs, how long have you been "clean"?

If not currently using drugs, have you had any recent lapses?      YES/NO

If Yes, please give details:

Are you currently on a heroin substitute programme?      YES/NO      METHADONE/SUBUTEX/DIAMORPHINE AMPS

If Yes, how much medication are you currently on? How long have you been taking it? Is this daily or weekly collection? Have you reduced the amount? How much did you stabilise on?

Who is your prescribing Doctor or Addiction Nurse? Please give contact details:

Have you ever been in a drug rehabilitation unit? YES/NO

If Yes, please give details.

Have you had contact with any drugs agencies/services? YES/NO

If Yes, please give details including contact details. Please state if using services now or in the past.

Please give any other relevant details with regards to your drug history:



**ALCOHOL USE:**

Have you had, or still have problems with alcohol?      YES/NO      If answering No, please go to next section.

Are you currently using alcohol?      YES/NO

If Yes, please give details; is this on a daily basis? How much? etc:

Do you believe you have an alcohol problem?      YES/NO

If Yes, what actions are you prepared to take to address your alcohol problem? (Emmaus has an expectation that you are prepared to address your alcohol issues):

If not currently using alcohol, how long have you been "dry"?

If not currently using alcohol, have you had any recent lapses?      YES/NO

If Yes, please give details:

Have you ever had an alcohol detox?      YES/NO

If Yes, please give details:

Have you ever been in an alcohol rehabilitation unit? YES/NO

If Yes, please give details:

Have you had contact with any alcohol support agencies/services? YES/NO

If Yes, please give contact details. Please state if using services now or in the past.

Please give any other relevant details with regards to your alcohol history:

**GAMBLING ADDICTION:**

Have you had, or still have problems with gambling? YES/NO If answering No, please go to next section.

Are you currently gambling? YES/NO

If Yes, please give details; is this on a daily basis? What do you gamble on? How much? etc:

Do you believe you have a gambling problem? YES/NO

If Yes, what actions are you prepared to take to address your gambling problem? (Emmaus has an expectation that you are prepared to address your gambling issues):

If not currently gambling, how long has it been?

Have you had contact with any gambling support agencies/services? YES/NO

If Yes, please give contact details. Please state if using services now or in the past.

Please give any other relevant details with regards to your gambling history:

**PHYSICAL HEALTH:**

Are you registered with a GP?

YES/NO

If Yes, please give contact details. If No, please state why and contact details of previous GP:

Do you have any current/past health issues?

YES/NO

If answering No, please go to next section.

Do you have a previous record of long-lasting periods of illness and/or hospital stays ? YES/NO

Please give details of current/past health issues, including details of any medication:

Do you have any disabilities?  
If Yes, please give details?

YES/NO

Do you have any allergies?  
If Yes, please give details:

YES/NO

Is there anything we need to know to make your stay at Emmaus more comfortable?

Please give details of any involvement with any health organisations/support agencies:

Are you currently taking medication that is not prescribed to you?

Please give any other relevant details with regards to your physical health:

**MENTAL HEALTH ISSUES:**

Do you have any current/past mental health issues, including depression? YES/NO

Please give details of current/past problems including details of any medication:

Have you ever been sectioned? (Voluntary or involuntary?) YES/NO

If Yes, please give details including hospital, dates, length of stay, etc?

Have you had a mental health assessment? YES/NO

If Yes, please give contact details of who did the assessment and date of the assessment:

Please give details of any involvement with any mental health organisations/support agencies/CPN:

Please give any other relevant details with regards to your mental health:

Do you have a history of self harm? YES/NO  
If Yes, please give details including dates:

Have you ever tried to commit suicide? YES/NO  
If Yes, please give details including dates:

**OFFENDING HISTORY:**

Please give details of any arrests/current/previous criminal convictions including dates:

Please give details of any driving offences including dates and penalties:

Please give details of current/previous probation/bail orders including dates:

Probation Officer : Contact number:

Please give details of any outstanding/pending charges, warrant and court appearances:

Have you ever committed a violent offence (which may or may not have resulted in a conviction?):

Please give details:

Have you ever committed arson (which may or may not have resulted in a conviction?):

Please give details:

Have you ever committed a schedule one offence (rape, sexual assault, etc?) (which may or may not have resulted in a conviction): If Yes, are you on the sex offenders register?

Please give details:

Have you ever been issued with an ASBO or an exclusion order?

Please give details:

Any further details you wish to add with regards to your criminal history?

We require all applicants to agree to a police check so please ensure that you have included everything on this form as we will verify this information with the police. We might not accept you or might have to ask you to leave if you have omitted offences or made false declarations.



Do you have any support needs that you feel Emmaus will need to address? E.g. Learning Difficulties etc.,

Do you have any religious or cultural needs?

Do you have debts?

YES/NO

If answering yes, please give details:

Do you smoke?

YES/NO

Are you able to cook for yourself?

YES/NO

Are you able to clean for yourself?

YES/NO

Are there any dates in the year that you find hard to deal with? Such as anniversaries of deceased's birthdays etc?

Please give details:

How do you feel that Emmaus could support you with this?

How would you describe yourself?

Why do you want to be a Companion at Emmaus Greenwich?

How do you feel about living in a community? Do you have previous experience of living in a community?

Please give details of previous employment, training and skills that you have:

Please give details of any skills/experience/qualifications you would like to develop if accepted into the community:

Do you have a driving licence?	YES/NO	VALID/EXPIRED	Number of points:
Do you have a passport?	YES/NO	VALID/EXPIRED	
Do you have a birth certificate?	YES/NO		

Is there anything else you would like to add? Please outline any details/information that you feel might support your application:



## VOLUNTEER WORK RELATED HEALTH AND SAFETY QUESTIONNAIRE

**NAME:** \_\_\_\_\_

In order to help in your assessment, please complete the following health and safety form:

	NO	YES	DETAILS
High blood pressure/Angina/Heart attack/Stroke			
Back related problems			
Arthritis			
Skin Condition (e.g, eczema)			
Liver Disease			
Balance Problems (e.g, vertigo)			
Work related breathing difficulties (e.g, asthma, emphysema)			
Any other work related physical disability/problem			
Are you able to comfortably climb 2 flights of stairs?			
Do you have difficulty walking?			
Do you have difficulty lifting?			
Mental health issue, such as problems working closely with companions or general public			

**I agree that the information provided is true and correct. I acknowledge that by giving information which I know to be false, I may be at risk of my licence to occupy being withdrawn.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**ABILITY TO WORK :**

Please confirm your willingness to fully engage in the Community and participate in its' social enterprises:

I, \_\_\_\_\_ confirm my willingness to fully engage in the Community and participate in its' social enterprises, as stated above.

Signature of Applicant: \_\_\_\_\_

**CONSENT DISCLOSURE:**

Applicant Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ National Insurance No. \_\_\_\_\_

I give my consent under the Data Protection Act 1998 for Emmaus Greenwich to contact any relevant agencies regarding myself in the best interests of me and the community. I understand this also includes checks with the police. If I am accepted at Emmaus Greenwich I also agree to Emmaus Greenwich sharing information about me with other agencies as needed.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\* \* \* \* \*

*Emmaus respects your confidentiality. Any information provided by you will only be used to assist in the risk assessment, needs assessment and selection process needed to comply with our admissions policy. This information will be kept securely only for as long as it is needed and will not be seen by anyone who is not involved in the above process.*

**I agree that the information provided is true and correct to the best of my knowledge. I acknowledge that by giving information which I know to be false, I may be at risk of my licence to occupy being withdrawn.**

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

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**Once completed, please return this application to:**

**By Email: info@emmausgreenwich.org**

**By Post: Admissions  
Emmaus Greenwich  
226 Elmley Street  
London, SE18 7NN**

**By Fax: 020 8929 0857**