



Thank you for your interest in Sunshine Home Share Colorado. This application packet contains the forms you will need to begin the application process for our program.

The completed packet includes:

- Application Form
- Non-Liability Agreement Form
- Non-Discrimination Agreement Form
- Release of Information Form
- Reference Check form with Three References
- Fee Service Agreement Form

We require that the application be mailed back to us before we move any further in the home sharing process. Completed forms should be mailed to:

Sunshine Home Share Colorado

3532 N Franklin St Ste E2/E3

Denver, CO 80205

A \$50 application fee for a background and credit check will be collected if/when we start the matching process.

We look forward to working with you! If you need assistance completing this application, please call us at 303-859-8311 or email us at becky@sunshinehomeshare.org

Sunshine Home Share Colorado Intake Application [Home Seeker](#)

(If there is more than one person applying over the age of 21, please complete a separate application)

Name:	
Address:	
Cell Phone #:	Home Phone #:
Email Address:	County of Residence:
How did get connected to Sunshine Home Share Colorado?	
Are you currently working with any other social service organizations?	

Housing Information

Current Living Situation: <input type="checkbox"/> Renting <input type="checkbox"/> Currently Home Sharing <input type="checkbox"/> Experiencing Homelessness <input type="checkbox"/> Transitional Housing <input type="checkbox"/> Other (Please specify)
If in Transitional Housing or Experiencing Homeless, are you working with any other agencies? If so, please list them:
How long have you been living at your current living situation? _____
Have you ever been evicted? <input type="checkbox"/> Yes <input type="checkbox"/> No
If renting: Landlords Name: _____ Phone #: _____
Number of people in household interested in home sharing?

Do you have children that will be home sharing with you? If so, how many and how old?

Do you have any pets that will be home sharing with you? If so, how many and what kind?

Maximum rent you can pay per month:

Date you need housing by:

Number of hours of service you need per week:

Number of hours of service you can provide per week:

Number of hours of companionship you need per week:

Number of hours of companionship you are willing to provide per week:

Demographic Data

(Demographic data is collected for grant and statistical purposes only. Eligibility for the program is not affected by the information collected)

Gender:

Age:

Date of Birth:

Ethnicity:

White American Indian/Alaskan Native. Asian Black/African American

Native Hawaiian/Pacific Islander Hispanic Middle Eastern

_____ Other

Do you have a disability?

Do you receive Medicaid?

Do you receive SNAP (Supplemental Nutrition Assistance Program)?

Annual Gross Income:

Highest Level of Education:

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
Do you have a good credit history?	Yes	No
Have you had a felony or misdemeanor charge?	Yes	No
Have you been on or are you currently on parole?	Yes	No
Have you been in or are you currently in probate?	Yes	No

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 authorize Sunshine Home Share Colorado to check references and to verify any information in this application. I understand that providing any false or misleading information will make me ineligible for the services of Sunshine Home Share Colorado.

Applicants Signature: _____ Date: _____

Liability Waiver and Release

I acknowledge and agree that:

- (1) While Sunshine Home Share Colorado ("Sunshine") helps facilitate the process of identifying and matching appropriate home share match candidates, all decisions on the selection, acceptance, and/or rejection of a home sharing arrangement and/or candidate are made solely by me, based on my own preferences and criteria;
- (2) I may be introduced to other potential candidates, but neither Sunshine nor any of its officers, directors, agents, or employees make any representations or warranties to me about any home sharing match candidate, or the candidate's ability to perform his/her obligations under a home sharing arrangement; and
- (3) Participation in Sunshine's home sharing program is completely voluntary.

To the fullest extent permitted by law, I, for myself, my minor children (if any), and our heirs, executors, and administrators, hereby irrevocably and unconditionally release and forever discharge Sunshine Home Share Colorado, its officers, directors, employees, and agents from any and all claims, liabilities, losses, damages, expenses, or causes of action, whether known or unknown and whether at law or in equity, arising from, out of, or in connection with the any home sharing arrangement and any other services or support provided to me during my participation in the home sharing program ("Claims"). I agree to refrain from directly or indirectly asserting any claim or demand, or commencing, instituting or causing to be commenced, any proceeding of any kind or nature against any person or entity released by this agreement that may arise from or may be based upon any matter purported to be released by this agreement. I further agree that Sunshine is not now and shall not in the future be obligated to supply financial support for the Home Owner or Home Seeker, which financial support is and shall remain the exclusive responsibility of the Home Owner and the Home Seeker, respectively.

By signing my name and the date, I confirm that I understand and agree to the terms of this Liability Waiver and Release agreement.

Applicant Signature: _____ Date: _____

COVID Client Safety Protocol Response

Sunshine Home Share Colorado takes the safety of our clients and program participants very seriously and adheres to the CDC guidelines. Clients will be required to wear PPE including masks when meetings with Sunshine Home Share personnel during the current health crisis. Clients who refuse to adhere to agency safety protocol will not be served. Our organization is using robust health screening, cleaning/disinfecting protocols. However, following these guidelines and protocols does not guarantee 100% safety with respect to COVID-19. If you chose to receive client services with Sunshine Home Share personnel, you are assuming the risk of potentially being exposed to COVID-19.

By signing my name and the date, I confirm that I understand and agree to the terms of this agreement.

Applicant Signature: _____ Date: _____

Non-Discrimination Agreement

Sunshine Home Share Colorado does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, military status, the presence of minor children, receipt of public assistance or gender identity in any of its activities or operations. These activities include, but are not limited to, hiring and firing of staff, selection of volunteers and vendors, and provision of services. We are committed to providing an inclusive and welcoming environment for all members of our staff, clients, volunteers, subcontractors, vendors, and clients. Everyone who participates in our program and services must agree to abide by this policy of non-discrimination. For this reason, while it is your decision regarding who you want to live with, we require you to be willing to meet match candidates who are different than you as part of the home share match process.

By signing my name and the date, I confirm that I understand and agree to abide by nondiscrimination policy of Sunshine Home Share Colorado.

Applicant Signature: _____ Date: _____

Release of Information

I hereby authorize Sunshine Home Share Colorado ("Sunshine") to disclose to potential home share match candidates any information about me that Sunshine possesses or obtains, including but not limited to information about my personality, lifestyle, age range, job status and needs within a home sharing match. While Sunshine will facilitate the process of matching candidates, I remain responsible for all decisions on the selection, acceptance, and/or rejection of a home sharing arrangement, and I will perform any and all due diligence I believe is necessary to make a decision on whether to enter into a home share arrangement.

I also hereby authorize Sunshine to talk with the listed references below about me in connection with a potential home share arrangement. Discussions with these references may include questions about, among other things, my temperament, personality, home sharing ability, substance abuse, mental health history, etc.

(please list references by name)

I acknowledge and agree that Sunshine and its personnel (including any licensed health care providers) are not my treating health care provider. I further acknowledge and agree that the information I (and my references) provide to them, including information relating to my mental and physical health, is subject only to Sunshine Homes' policies and procedures on the handling of such information, and not to any state or federal laws governing the confidentiality of health information.

By signing my name and the date, I confirm that I understand and agree to the terms of this Release of Information agreement.

Applicant Signature: _____ Date: _____

Reference Form Sunshine Home Share Colorado

For: _____

Please provide us with 3 references who can verify your ability to have a successful home sharing relationship.

Reference 1

Name:
Relation to Home Share Participant:
Address:
Email:
Phone:
Preferred method of contact?

_____ Date Reference Received _____ Staff Initials

Reference 2

Name:
Relation to Home Share Participant:
Address:
Email:
Phone:
Preferred method of contact?

_____ Date Reference Received _____ Staff Initials

Reference 3

Name:
Relation to Home Share Participant:
Address:
Email:
Phone:
Preferred method of contact?

_____ Date Reference Received

_____ Staff Initials

I agree to let Sunshine Home Share Colorado check my references and understand that this process may impact my ability to utilize the home sharing program. I acknowledge that I need three references to be verified to complete the application process.

Applicant Signature: _____

Date: _____