

HOST HOME PROGRAM PROVIDER APPLICATION

Date of Application: _____

| | | | |
|---|--------------------------------------|----------------------------|--------------------------|
| Applicant Name (Last, First, MI): | Gender: | Preferred Pronouns: | DOB(mm/dd/yyyy): |
| Co-Applicant's Name (Last, First, MI): | Gender: | Preferred Pronouns: | DOB (mm/dd/yyyy): |
| Relationship of Applicants: | | | |
| Street Address: | | | |
| City: | State: | Zip Code: | |
| Applicant Telephone/Email | Co-Applicant Telephone/Email | | |
| Cell: | Cell: | | |
| Home: | Home: | | |
| Work: | Work: | | |
| Email: | Email: | | |
| Best mode of communication: | Best mode of communication: | | |
| How long have you been a resident of NC? | | | |
| Applicant: ____/____ years/mos | Co-Applicant: ____/____ years/mos | | |
| What other states have you lived in (past 3 years)? | | | |
| Applicant: | Co-Applicant: | | |

| | |
|---|----------------------------------|
| Preferred Length of Time to House a Youth: | |
| 1-3 Months: () | 9-12 Months: () |
| 3-6 Months: () | 12 Months or Longer: () |
| 6-9 Months: () | Emergency Basis Only: () |

Please describe how to reach your home from downtown Charlotte:

Bus lines near your home: _____

****Please include copies of your insurance policies, if applicable.***

List three references that you have known at least 1 year. If you are applying with another person, your references should know both of you and how you function as a family. Time Out Youth will contact them with questions.

| Name | Street Address | Email Address | Phone Number | Relationship |
|------|----------------|---------------|--------------|--------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |

Employment History (Applicant): Begin with current job and list for the past 3 years

| Occupation: | Place of employment: | City: | Phone: | Time employed: |
|-------------|----------------------|-------|--------|----------------|
| | | | | |
| | | | | |
| | | | | |

If you are currently not working, what is your source of income/resources?

| Employment History (Co-Applicant): Begin with current job and list for the past 3 years | | | | |
|--|----------------------|-------|--------|----------------|
| Occupation: | Place of employment: | City: | Phone: | Time employed: |
| | | | | |
| | | | | |
| | | | | |

If you are currently not working, what is your source of income/resources?

**The following pages contain questions which are to be answered individually by the applicant and co-applicant (there are two copies). Please return both copies in the application packet.
Thank you.**

APPLICANT

Name: _____

Are you (check all that apply): ___ Lesbian ___ Bisexual ___ Gay ___ Transgender ___
 Heterosexual ___ Queer ___ Other: _____

How would you characterize your comfort level with your sexual orientation and gender identity
1= not comfortable at all 5= extremely comfortable
 (Please circle corresponding number below)?

sexual orientation 1 2 3 4 5 gender identity 1 2 3 4 5

If you are LGBTQ, are you out to/at (please check all that apply):
 ___ friends ___ work ___ parents ___ siblings ___ relatives ___ other (specify)

How easy is it for you to talk about sexual orientation and gender identity issues?
 1= not easy at all 5= extremely easy

sexual orientation 1 2 3 4 5 gender identity 1 2 3 4 5

Are you bilingual or multilingual? If yes, what languages do you speak?

Do you smoke? ___ yes ___ no If yes, do you smoke in your home? ___ yes ___ no

Do you drink alcohol? ___ yes ___ no

Do you have any concerns about your drinking? ___ yes ___ no
 If yes, please explain why you are concerned:

Have you ever used illegal drugs? ___ yes ___ no

If yes, do you currently use illegal drugs? ___ yes ___ no

Legal History:

| Have you ever... | YES | NO |
|---|-----|----|
| Been arrested by any law enforcement officer? | | |
| Been charged with any offense even if dismissed? | | |
| Been convicted of any offense? | | |
| Been charged with or convicted of an offense against a youth/minor? | | |
| Abused, neglected, or molested any child? | | |
| If yes to any of the above, please explain: | | |

Please answer the following questions so that we may get to know you. You may use the back of the page if you need more space.

1) Please write a little bit about why you are interested in hosting a young LGBTQ person in your home:

2) Please describe the characteristics of a young person you **would** wish to host:

3) Please describe the characteristics of a young person you **would not** wish to host:

4) How do you self-identify (i.e. gender, race, ethnicity, class)?

5) Please describe any hobbies and/or interests:

6) Please write about your strengths, skills and any other relevant information that you would like to share:

7) Please describe any physical and/or mental health concerns in your family that could impact someone living in your home:

Applicant Signature Page

I _____ hereby certify that the facts contained in the Time Out Youth Host Home Application are true and complete to the best of my knowledge.

In connection with my application for Time Out Youth Host Home Program, I understand that an investigative inquiry on myself will be made including **criminal convictions, motor vehicle, and other reports**. These reports will include information as to my character, work habits, performance and experience along with the reasons for termination of past employment from previous employers. Further, I understand that you will be requesting information from various **Federal, State, and other agencies** that maintain records concerning my past activities relating to my **driving, criminal, civil, education**, and other experiences.

Signature: _____ Date: ____ / ____ / ____

If returning electronically, check here to authorize Time Out Youth to complete your background check.

PLEASE PRINT CLEARLY

Last Name _____ First Name _____ Middle Initial _____

OTHER Names Used:

Social Security Number: _____ Date of Birth: ____ / ____ / ____

CO-APPLICANT

Name: _____

Are you (check all that apply): Lesbian Bisexual Gay Transgender Heterosexual Queer Other: _____

How would you characterize your comfort level with your sexual orientation and gender identity
1= not comfortable at all **5= extremely comfortable**
 (Please circle corresponding number below)?

sexual orientation 1 2 3 4 5 gender identity 1 2 3 4 5

If you are LGBTQ, are you out to/at (please check all that apply):
 friends work parents siblings relatives other (specify)

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Do you smoke? yes no If yes, do you smoke in your home? yes no

Do you drink alcohol? yes no

Do you have any concerns about your drinking? yes no

If yes, please explain why you are concerned:

Have you ever used illegal drugs? yes no

If yes, do you currently use illegal drugs? yes no

Legal History:

| Have you ever... | YES | NO |
|---|-----|----|
| Been arrested by any law enforcement officer? | | |
| Been charged with any offense even if dismissed? | | |
| Been convicted of any offense? | | |
| Been charged with or convicted of an offense against a youth/minor? | | |
| Abused, neglected, or molested any child? | | |

| | | |
|---|--|--|
| If yes to any of the above, please explain: | | |
|---|--|--|

Please answer the following questions so that we may get to know you. You may use the back of the page if you need more space.

1) Please write a little bit about why you are interested in hosting a young GLBTQ person in your home:

2) Please describe the characteristics of a young person you **would** wish to host:

3) Please describe the characteristics of a young person you **would not** wish to host:

4) How do you self-identify (i.e. gender, race, ethnicity, class)?

5) Please describe any hobbies and/or interests:

6) Please write about your strengths, skills and any other relevant information that you would like to share:

7) Please describe any physical and/or mental health concerns in your family that could impact someone living in your home:

Co-Applicant Signature Page

I _____ hereby certify that the facts contained in the Time Out Youth Host Home Application are true and complete to the best of my knowledge.

In connection with my application for Time Out Youth Host Home Program, I understand that an investigative inquiry on myself will be made including **criminal convictions, motor vehicle, and other reports**. These reports will include information as to my character, work habits, performance and experience along with the reasons for termination of past employment from previous employers. Further, I understand that you will be requesting information from various **Federal, State, and other agencies** that maintain records concerning my past activities relating to my **driving, criminal, civil, education**, and other experiences.

Signature: _____ Date: ____ / ____ / ____

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PLEASE PRINT CLEARLY

Last Name _____ First Name _____ Middle Initial _____

OTHER Names Used:

Social Security Number: _____ Date of Birth: ____ / ____ / ____

CREATIVE ASSIGNMENT

Please write a letter to a potential youth talking about you, your family and community, some of your life experiences, strengths, etc. Write it with a young person in mind as the reader. The purpose of this letter is for the youth to get to know you a bit, find out why you want to be a host, and see if you might be someone they would like to live with. In addition, this letter will help the Time Out Youth Staff have a better sense of you as a potential volunteer host.