The Social Housing Registry of Ottawa

Additional Assessment Information - Youth Services Bureau

Please complete the questions as fully as possible and return to:

The Registry at 2197 Riverside Dr., 5th Floor, Ottawa, Ontario K1H 1A9

The Youth Services Bureau is a client-centred, choice-based, diversity positive organization. We appreciate you taking your time to answer the following questions as it will help them to assess your present housing and life situation so that ultimately they can provide the best service possible.

1. Housing Situation

a)	, , , ,						
	Shelter			couch surfing			
	On the stree	et 🗆	Rooming ho				
	In custody		Home/family	y			
	Homeless						
	Other:						
b)	for you, is st	thing about your prese ressful for you, impacts	s your health or th	at increases y	our worry?	safety issue	
2. Da	ily Activities	;					
i)	School: N	lumber of credits comp	leted				
ii))					
iii)	Volunteer or	Other Activities:					
fac	ced discrimi	nat any of these issue nation in securing a p	lace to live?	no	somewhat	yes	
•	,	g.generally poor, HIV, H					
	,	Depression, anxiety, bi-p	olar)				
	dian or visible i	minority					
Substance							
Lack of edu							
	ployment expe	erience					
Single pare							
		ysical, mental, emotional	•				
Problems v	vith authority fi	gures (parents, teachers,	police)				
Lack of adu	ult or family sup	oport					
Isolation/lo	neliness						
Have never	r lived on my o	wn					
Struggles v	vith sexual orie	entation					
Struggles v	vith gender ide	ntity					
Traumatic (childhood expe	oriences		П			

5. Please check off anything below th	at you	feel supportive housing can help with.	
rosa Managamant	П	Possibing Conflict	
ress Management ccepting responsibility		Resolving Conflict Sexual Health	
proving My Communications		Sexual Orientation	
earning to Trust		Assertiveness Training	
ealing with Emotions		Resolving how I feel about my past	
exuality		HIV/AIDS Awareness	
elationship Building		Gender Identity	
nger Awareness		Substance use and/or awareness	
creasing Self Esteem & Self Confidence		Health awareness, nutrition & fitness	
oneliness, living alone, and being alone		Budgeting and Money Management	
Relationship Building		Accessing Community Resources	
Norking independently			
Grocery Shopping		Other:	
ooking Skills			
ousekeeping and Home Maintenance			
orking as part of a group		Value Otraca oth a	
Obtaining personal documents		Your Strengths:	
eisure and recreational planning sing Public Transportation			
mployment Skills			
ersonal Care			
me Management			
Ü			
Your Declaration	& Coi	nsent to Further Information:	
1 3 3 2 3 3 3 3 3 3 3 3 3			
understand that this information will be us ousing program.	sed by	Youth Services Bureau to determine my eli	igibility fo
	201.00	ntact ma for an interview	
understand that Youth Services Bureau r	nay co	illact the for all interview.	
understand that Youth Services Bureau r	nay co	maci me for an interview.	