**Thrive Housing**

**Application Form**

**Introduction**

**About Thrive Women’s Aid**

For over 40 years, Thrive Women’s Aid has provided a haven for women, children and young people in Neath Port Talbot, helping them to rebuild their lives and regain their independence in safe communities.

At Thrive we believe everyone has the right to live in safety and have a future without fear.

We mostly support women who are affected by domestic abuse and other forms of violence against women. For this reason, thrive are committed to providing services by women for women.

Our comprehensive services support women to improve their mental, physical, housing and relationship needs to build independence and empower women and their families to live a happy and healthy life free from violence and abuse.

We don’t just help and support women in need, we help the whole family to thrive to ensure the cycle of abuse is broken for good.

**THRIVE HOUSING, who is it for?**

Thrive Housing is a supported housing scheme providing specialist accommodation to victims of domestic abuse and their families. Access to housing will be made available to applicants who meet the following criteria:

* Be female or identify as female
* Be aged eighteen, or over
* Have experienced domestic abuse and / or be currently experiencing the impact of historical domestic abuse
* Be eligible to receive housing benefit
* Be in need of housing related support
* Want to engage in support offered by Thrive Housing

**What support will we provide?**

A Housing Officer will support tenants to address any needs they have relating to managing their tenancy with an emphasis on empowerment, independence and improving lives following domestic abuse.

Tenants and their children will also have the option of support from other services Thrive have to offer, which include crisis support, emergency accommodation, peer support groups, counselling, children’s groups, activities, and trips.

We can also help women and their children to access support from external agencies.

**How long can you live at a Thrive Property?**

The tenancy will continue until the tenant no longer requires support to live independently in line with the projects aims. The tenant will be provided with appropriate notice when the tenancy is due to end and will be supported to move on.

**How to apply**

Applicants will need to complete a **Housing Application Form** (attached to this document) providing information in relation to their individual circumstances.

Due to the amount of stock owned by Thrive Housing, we will not operate a waiting list for properties. Therefore, applicants will be able to apply for houses as and when they become available.

Applications will close once five applicants have been shortlisted. Thrive will arrange to complete a face to face assessment with the individual before allocating a property.

We will obtain references for all shortlisted applicants.

The **Housing Application Form** should be returned, and password protected, to [housing@thrivewa.org.uk](mailto:housing@thrivewa.org.uk)

If you have any queries, please contact Kelly Thomas or Chantelle Davies on 01639 894864 or [kellyt@thrivewa.org.uk](mailto:kellyt@thrivewa.org.uk) / [chantelled@thrivewa.org.uk](mailto:chantelled@thrivewa.org.uk)

**Housing Application Form**

|  |
| --- |
| **Personal Information** |

|  |  |  |  |
| --- | --- | --- | --- |
| First name |  | Surname |  |
| Date of birth |  | Gender Identity |  |
| Safe number to contact |  | Email address |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Are you a British Citizen? | Yes / No | If NO, How long have you lived in the UK? |  |
| Do you have recourse to public funds? |  | Do you have spousal visa? |  |
| Do you Refugee / Asylum status? |  | Do you have the right to remain in the UK? |  |
| Do you have a current passport? |  | Do you have access to a DDVC? |  |

|  |  |
| --- | --- |
| What is your current address? |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| What is your current housing status? | Homeless |  | Living with someone |  | Private rented |  |
| Temporary accommodation |  | Housing association |  | Other |  |

|  |  |
| --- | --- |
| If other, please explain |  |

|  |  |
| --- | --- |
| Please indicate which property you are applying for: |  |

|  |
| --- |
| How will you benefit from housing with Thrive? |
|  |
| What do you consider to be your support needs? |
|  |

|  |
| --- |
| **Occupants – please enter information of any other occupants who will be living with you** |

|  |
| --- |
| **Occupant 1** |

|  |  |  |  |
| --- | --- | --- | --- |
| First name |  | Surname |  |
| Date of birth |  | Age |  |
| Relationship |  |

|  |
| --- |
| **Occupant 2** |

|  |  |  |  |
| --- | --- | --- | --- |
| First name |  | Surname |  |
| Date of birth |  | Age |  |
| Relationship |  |

|  |
| --- |
| **Occupant 3** |

|  |  |  |  |
| --- | --- | --- | --- |
| First name |  | Surname |  |
| Date of birth |  | Age |  |
| Relationship |  |

Continue on a separate page if there are more than 3 other occupants

|  |
| --- |
| **Finances** |

Please include amount and frequency of payments

|  |  |  |  |
| --- | --- | --- | --- |
| Universal Credit |  | PIP |  |
| ESA |  | Child Benefit |  |
| Child Tax Credit |  | Other |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Is this a joint or sole claim? | Joint / Sole | Are there any suspensions in place? | Yes / No |

|  |
| --- |
| **Employment status** |

|  |  |  |  |
| --- | --- | --- | --- |
| Do you work? | Yes / No | Employer and Job Role |  |
| Hours |  | Salary |  |

|  |
| --- |
| **Contact arrangements** |

|  |  |
| --- | --- |
| Do you give permission to be contacted by Thrive Housing? | **YES / NO** |
| If Yes – by which method? | **TICK 🗹** |
| * Telephone call | □ |
| * Text message | □ |
| * Voicemail | □ |
| * By letter | □ |

|  |  |  |  |
| --- | --- | --- | --- |
| Please Sign: |  | Date |  |

|  |
| --- |
| Thank you for completing the application.  Please return this form to:  **Email:** [**housing@thrivewa.org.uk**](mailto:housing@thrivewa.org.uk)and encrypt document with password.  **Post:** PO Box 20, Thrive Women’s Aid, Port Talbot SA13 1AA  You will be contacted in due to course by the one of the team to discuss the progress of your application. |

For office use:

|  |  |  |  |
| --- | --- | --- | --- |
| Received by: |  | Date |  |
| Contact made: |  | Date |  |