



# LOOKOUT EMERGENCY AID SOCIETY

## LION HOTEL PROGRAM

316 Powell St., Vancouver, B.C. V6A 1G4  
(604) 806-0356

### APPLICATION

The Lion Hotel Program offers 35 rooms in a partnership agreement with Lookout. The housing is through single rooms in a hotel-like setting. Support is provided through a Tenant Support Worker on-site for 8 hours daily. Please see our housing description for more information.

Please note: all information is kept in confidence.

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Current Address: \_\_\_\_\_

Contact number: \_\_\_\_\_ Income source: \_\_\_\_\_

Do you have a Financial Aid Worker? Name \_\_\_\_\_ Phone# \_\_\_\_\_

Do you have a Mental Health Worker? Name \_\_\_\_\_ Phone# \_\_\_\_\_

Do you have other Support Workers? Name \_\_\_\_\_ Phone# \_\_\_\_\_

Name \_\_\_\_\_ Phone# \_\_\_\_\_

Do you live with any of the following health concerns:

- physical handicap What? \_\_\_\_\_  use a wheelchair?
- have mobility problems e.g. have difficulty climbing stairs?
- mental illness  difficulty breathing/easily tired
- heart disease  diabetes
- hearing difficulties  do you use in-home nursing care?
- do you have home support services?  alcohol or drug problems?

If you use alcohol or drugs, how often?  daily  1 – 3 X per week  5 – 6 X per month?

Are you on medication? Yes \_\_\_ No \_\_\_

Have you ever been violent - towards other people? Yes \_\_\_ No \_\_\_

- towards property? Yes \_\_\_ No \_\_\_

- within the past two years? Yes \_\_\_ No \_\_\_

**Lion Hotel Program - Application Form - Page 2**

If you answered 'yes' to any questions about violent behaviour, can you tell us what caused you to be violent?

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Have you been evicted from anywhere else within the last two years? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, why? \_\_\_\_\_

**What is your current housing like?**

Currently live in the Downtown Eastside	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>		
Safety (physical condition)	Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Poor	<input type="checkbox"/>
Security (crime, intimidation)	Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Poor	<input type="checkbox"/>
Sanitary condition (dirty shared toilets/tubs, infested with pests)	Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Poor	<input type="checkbox"/>
No elevator but needs one	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>		

Why are you interested in living in the Lion Hotel?

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What assistance would you request from the Lookout Tenant Support Workers?

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If I move into the Lion Hotel and my worker or doctor asks that my money and/or medication be administered by the staff, I will agree. If they ask for you to manage your own medications, we will agree.

Further to the *Personal Information Protection Act* and the *Privacy Policy of the Lookout Emergency Aid Society*, this form has been designed to ensure that the individual's privacy and confidentiality is respected, while ensuring for the provision of the exchange of relevant service planning information between agencies. At any time, only immediately relevant information shall be shared as required on a "need to know" basis to ensure effective service planning and continuity of care.

I hereby give consent to the Lookout Tenant Support Workers at the Lion Hotel to share pertinent information with workers from other agencies or services (e.g., EAW, Doctor, Social worker) to assess my application for the Lion Hotel on a "need to know" basis.

Signed \_\_\_\_\_ Date \_\_\_\_\_