****

**KEY WORKER HOUSING APPLICATION FORM**

**Please complete in block capitals.**

**1 Personal Details**

Please complete your details under Applicant 1.

If you wish to apply for a joint tenancy with someone else, please give their details as Applicant 2.

**APPLICANT 1**

Title:

First Name: Surname: Date of Birth:

Address:

Post Code:

Telephone:

Mobile:

Email:

**APPLICANT 2**

Title:

First Name: Surname: Date of Birth:

Address:

Post Code:

Telephone:

Mobile:

Email:

**2 Please tell us why you would like to be considered for this property:**

…………………………………………………………………………………………………………………………...

…………………………………………………………………………………………………………………………...

……………………………………………………………………………………………………………………………

……………………………………………………………………………………………………………………………

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

**3 Household Details**

3.1 Please list everyone who is living with you at present and if they are going to be moving with you.

|  |  |  |  |
| --- | --- | --- | --- |
| **First Name** | **Surname** | **Date of Birth** | **Relationship to You** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**4 Employment Details**

|  |
| --- |
| **APPLICANT 1 (YOU)** |
| Employers Name: |
| Employers Address: |
|  |
| Postcode: |
| Employers Telephone: |
| Employers Email Address: |
|  |
| **APPLICANT 2** |
| Employers Name: |
| Employers Address: |
|  |
| Postcode: |
| Employers Telephone: |
| Employers Email Address: |

**5 Previous Addresses**

5.1 Please list the addresses where you have lived for the last 5 years:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Address** | **Date from** | **Date**  **to** | **Name and Address of Landlord or Owner Occupier** | **Reason for Leaving** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

5.2 Do you or your joint applicant have rent arrears or any other tenancy related issues with current or previous landlords?

YES NO

If yes, please provide details:

…………………………………………………………………………………………………………………

…………………………………………………………………………………………………………………

5.3 Are you currently on the Highland Housing register?

YES NO

**6 Present Accommodation Details**

6.1 Please tell us about your current accommodation:

…………………………………………………………………………………………………………………...………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………..

6.2 Are there any significant problems with the condition of the place where you live? If yes, please provide details below:

………………………………………………………………………………………………………………….………………………………………………………………………………………………………………….………………………………………………………………………………………………………………….………………………………………………………………………………………………………………….……………………………………………………………………………………………………………........

6.3 Have you or anyone living you been asked to leave your present accommodation?

YES NO

If yes, by what date to you have to leave (if known)?

……………………………………………………………………………………………….………………….

6.4 Please can you provide more details as to why you have to leave (e.g. end of tenancy, mortgage/rent arrears, no longer employed by landlord etc.)

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

**7 References**

Please complete & return the attached mandate (Appendix 1)

This is required for any reference that the Highland Small Communities Housing Trust request.

A photocopy or scan of the original form can be emailed back to us.

Please provide details of a previous landlord who we may contact for a reference:

Name:

Address:

Post Code:

Telephone Number:

Period of tenancy: From To

Please provide details of a community contact or your current employer who we may contact for a reference:

Name:

Address:

Post Code:

Telephone Number:

Period of tenancy: From To

**8 Next of Kin Details**

These details will **ONLY** be used if your application has been successful and if we need to contact your next of kin urgently in the case of an emergency.

Name:

Address:

Post Code:

Telephone Number:

Mobile Number:

Relationship:

**9 Photographic ID**

Photographic ID must be submitted with your application. This can be a copy of a current photo card driving licence or a copy of a valid passport.

We require this under the Code of Practice for illegal immigrants as verification that we are not letting the property to someone who does not have a right to stay in the UK.

**10 Data Protection Statement**

In accordance with GDPR, the information that you provide on this form and will be used to process and assess your application.

We may check the information collected with third parties or with any other information that is already held by us. We may also use or pass your information to third parties or use it in other ways as permitted by law.

By signing this application form we will be assuming that you agree to the processing of your personal data and any sensitive personal data disclosed in accordance with the Information Commissioner’s Office (ICO) guidelines.

**11 Declaration**

I declare to the best of my knowledge and belief, all particulars I have given in all parts of this application form, are complete and true. If I am not successful in my application, I understand that my application will be retained for 6 months.

Tick the box to acknowledge your understanding of, and agreement with, the Data Protection Statement and Declaration above.

**By signing this application form I give consent to HSCHT to the processing of my personal data and any sensitive data in accordance with ICO guidelines.**

Signed (1) Print Name:

Signed (2) Print Name:

Date:

****

**Appendix 1 – Housing Application Reference Mandate**

To whom it may concern

**HOUSING APPLICATION REFERENCES**

**NAME(S) ………………………………………………………………………………….**

**ADDRESS ………………………………………………………………………………….**

**……………………………………………………………………………………………....**

This is to confirm that I/we give permission for the Highlands Small Communities Housing Trust to contact persons for a reference either relating to the tenancy we currently have/or have had or for a character reference in support of my application for housing.

Signed (1) Print Name:

Signed (2) Print Name:

Date:

**7 Ardross Terrace, Inverness IV3 5NQ. Tel & Fax 01463 233549**

**E:** [**info@hscht.co.uk**](mailto:info@hscht.co.uk) **W:** [**www.hscht.co.uk**](http://www.hscht.co.uk)

The Highlands Small Communities Housing Trust is a Company Limited by Guarantee (SC-182862) and a Scottish Charity (SCO-27544)