

# Application Form – Two Henry Rd

## Applicant Information

Resident 1 – Personal Details			
Date of application:			
Full Name:			
Date of Birth:		Age:	
Residential Address (include postcode):	Postal Address (include postcode):		
Phone Number:	H:	M:	W:
Email Address:			

Are you an Australian citizen? ☐ YES ☐ NO

Are you of Aboriginal Descent? ☐ YES ☐ NO

Resident 2 – Personal Details			
Date of application:			
Full Name:			
Date of Birth:		Age:	
Residential Address (include postcode):	Postal Address (include postcode):		
Phone Number:	H:	M:	W:
Email Address:			

Are you an Australian citizen? ☐ YES ☐ NO

Are you of Aboriginal Descent? ☐ YES ☐ NO

Relationship to Resident 1	
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## Resident One

### Family and Community

#### Question 1

How long have you resided in the Shire of Irwin?

☐ 0 – 2 years ☐ 2 - 4 years ☐ 4 - 6 years ☐ 6 - 8 years ☐ 8 – 10 years ☐ more than 10 years

#### Question 2

Do you have family and/or social networks in town that you either receive support from or give support to? Please tick the box that best describes the relationships.

- ☐ No family in town, some social network.
- ☐ Supportive family and/or social network.
- ☐ Extensive supportive family and/or social network
- ☐ Extensive supportive family and/or social network with regular obligations
- ☐ Other *(please describe below)*

#### Question 3

Non aboriginal and over the age of 65? *(Please circle current age).*

65                  66                  67                  68                  69                  70+

Aboriginal and over the age of 55? *(Please circle current age)*

55                  56                  57                  58                  59                  60+

#### Question 4

Are you currently or have you in the past volunteered for community groups? ☐ YES ☐ NO

Please check the most appropriate:-

☐ 0 – 2 years ☐ 2 - 4 years ☐ 4 - 6 years ☐ 6 - 8 years ☐ 8 – 10 years ☐ more than 10 years

Please describe your involvement (*volunteering for community groups*)

### Question 5

Are you eligible for Social (Band A) or Affordable (Band B) Housing Income Eligibility Limits?

☐ YES ☐ NO

If Yes - please describe below

## Health and Care Requirements

### Question 1

What is your care status?

- ☐ Live with carer
- ☐ Lives independently, no direct or indirect care needed
- ☐ Lives independently with indirect care (*complete below*)

What home care package do you currently receive?

- ☐ Level 3 or 4      ☐ Level 1 or 2      ☐ Entry level CHSP services.

### Question 2

Please tick the statement that best describes your current level of wellness.

- ☐ Poor health, complex care needs, recent hospital admission.
- ☐ Fair health, hospital admission in the past 6 – 12 months.
- ☐ In good health.

**Question 3**

How will you benefit from living in this type of residence? *(you can tick more than one)*

- ☐ Mobility impaired.
- ☐ Diagnosed with a progressive neurological disease i.e. dementia, alzheimer's, parkinson's disease.
- ☐ Community experience

Please elaborate on the above.


<b>Disclaimer and Signature</b>
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I hereby acknowledge and declare that:

- a) The answers on this application are true and correct to the best of my knowledge
- b) I understand that any false or misleading information provided on this application will result in refusal of this application

<b>Signature</b> (Applicant Resident 1)		<b>Date:</b>	
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## Resident Two

### Family and Community

#### Question 1

How long have you resided in the Shire of Irwin?

☐ 0 – 2 years ☐ 2 - 4 years ☐ 4 - 6 years ☐ 6 - 8 years ☐ 8 – 10 years ☐ more than 10 years

#### Question 2

Do you have family and/or social networks in town that you either receive support from or give support to? Please tick the box that best describes the relationships.

- ☐ No family in town, some social network.
- ☐ Supportive family and/or social network.
- ☐ Extensive supportive family and/or social network
- ☐ Extensive supportive family and/or social network with regular obligations
- ☐ Other (*please describe below*)

#### Question 3

Non aboriginal and over the age of 65? (*Please circle current age*).

65                  66                  67                  68                  69                  70+

Aboriginal and over the age of 55? (*Please circle current age*)

55                  56                  57                  58                  59                  60+

#### Question 4

Are you currently or have you in the past volunteered for community groups? ☐ YES ☐ NO

Please check the most appropriate:-

☐ 0 – 2 years ☐ 2 - 4 years ☐ 4 - 6 years ☐ 6 - 8 years ☐ 8 – 10 years ☐ more than 10 years

Please describe your involvement (*volunteering for community groups*)

### Question 5

Are you eligible for Social (Band A) or Affordable (Band B) Housing Income Eligibility Limits?

☐ YES ☐ NO

If Yes - please describe below

## Health and Care Requirements

### Question 1

What is your care status?

- ☐ Live with carer
- ☐ Lives independently, no direct or indirect care needed
- ☐ Lives independently with indirect care (*complete below*)

What home care package do you currently receive?

- ☐ Level 3 or 4      ☐ Level 1 or 2      ☐ Entry level CHSP services.

### Question 2

Please tick the statement that best describes your current level of wellness.

- ☐ Poor health, complex care needs, recent hospital admission.
- ☐ Fair health, hospital admission in the past 6 – 12 months.
- ☐ In good health.

### Question 3

How will you benefit from living in this type of residence? *(you can tick more than one)*

- ☐ Mobility impaired.
- ☐ Diagnosed with a progressive neurological disease i.e. dementia, alzheimer's, parkinson's disease.
- ☐ Community experience

Please elaborate on the above.


### Disclaimer and Signature

I hereby acknowledge and declare that:

- c) The answers on this application are true and correct to the best of my knowledge
- d) I understand that any false or misleading information provided on this application will result in refusal of this application

**Signature**  
(Applicant Resident 2)

**Date:**