HOME SEEKER PUBLIC INFORMATION FORM

The information you provide on this form will be available to all other Project SHARE clients. It may be read to clients during phone referrals or viewed by clients during office visits. Please print clearly and fill this form as completely as you are willing.

DATE _______ FIRST NAME _______ SEX _______ AGE _______

Do you have a child, family member or partner who will live with you? If so, please list first name and age: __________

HOME PHONE ___________________________ What times are you willing to receive calls at this number?
   Earliest _______ Latest _______ Best _______

CELL PHONE ___________________________ What times are you willing to receive calls at this number?
   Earliest _______ Latest _______ Best _______

WORK PHONE ___________________________ What times are you willing to receive calls at this number?
   Earliest _______ Latest _______ Best _______

EMAIL ____________________________

SPACE NEEDED ____________________________
   1 BEDROOM _______ 2 BEDROOMS _______

RENT _______ List the most rent you are willing to pay to pay for rent and utilities combined each month _______

LOCATION _______ To which East Bay Area cities/locations are you willing to relocate? ________

Who do you want to contact? (Check one)
   _______ In addition to contacting those who have an established home with a room to offer, I am also interested in contacting other homeseekers (people who want roommates but do not currently have a place) to see about seeking housing together.
   _______ I am only interested in contacting those who already have an established home with a room to offer.

Gender (check where appropriate)
   _______ I am only interested in male ☐ female ☐ housemates.
   _______ I prefer male ☐ female ☐ housemates, but am open to housemates of any gender.
   _______ I have no gender preferences or requirements in housemates.

Children _______ Are you open to living with someone who has an infant, child, or children? _______

Storage _______ Do you have furniture and other large belongings you need to keep with you? _______

Transportation _______ Do you have a current driver’s license? Yes ☐ No ☐ Do you have a reliable car? Yes ☐ No ☐
   Do you need to be near public transportation? Yes ☐ No ☐

Smoking _______ Do you smoke? Yes ☐ No ☐ If so, are you willing to smoke outside? Yes ☐ No ☐
   Are you willing to live with housemates who smoke indoors? Yes ☐ No ☐
   Are you willing to live with housemates who smoke outdoors? Yes ☐ No ☐

Drinking _______ How often do you drink alcohol? Once a week? ☐ 2 – 3 times a week? ☐ 4 or more times a week? ☐
   Will you tolerate housemates who drink at home: Once a week? ☐ 2 – 3 times a week? ☐ 4 or more times a week? ☐

Pets _______ Do you have pets? Yes ☐ No ☐ If yes please be specific:
   Would you be willing to live in a home where there are pets? Yes ☐ No ☐ Specify: _______

For Office use ONLY
INIT __________ ID# HS- __________
Housekeeping Standards: Briefly describe your standard of cleanliness:

Briefly describe the standards of cleanliness you expect in housemates?

Do you have any allergies or aversions to any popular households products? (Please be specific)

Eating Habits: Do you have any special eating habits?

Do you desire or require housemates who have eating habits similar to yours? Yes [ ] No [ ]

Arrangement Desired: Number the following 1 through 3, with 1 being the most desirable arrangements:

_____ Independent Household: Cook separately and have minimal involvement with housemates.

_____ Semi-Cooperative Household: Share some meals or activities.

_____ Communal Group: Generally share meals/chores; have greater involvement such as house meetings.

What should a potential housemate know about you and your situation? Please write something about your personality, your occupation your schedule, your noise habits, your guest/visitor habits and what you expect from a shared living arrangement. (Please feel free to attach additional pages if needed.)

References

1) Name: ___________________ Relationship: ___________________ Phone: ___________________

2) Name: ___________________ Relationship: ___________________ Phone: ___________________

3) Name: ___________________ Relationship: ___________________ Phone: ___________________

(Examples of references: current or former supervisor, social worker, landlord, or current/former housemate. Please inform these references that you have listed them here and keep in mind that any Project SHARE client may call them.)