

Hawaii Intergenerational
Network
HOMESHARING HAWAII
PO Box 279, Waimanalo,
HI 96795 808.308.5291
homesharinghawaii@gmail.com
homesharinghawaii.org



For office use only - 2-6-2021

Date application received: BckGrd

Consent received: ☐ Yes

I have a home to share
.....

Please Print

How did you hear about Homesharing Hawaii? _____

Have you had any past association with Homesharing Hawaii? ☐ Yes ☐ No

Contact Information

PERSON 1

Full name _____

Other names used _____

PERSON 2 (if applicable)

Full name _____

Other names used _____

.....
Mailing address _____

City _____ State _____ Zip _____

Physical address (if different) _____

Email _____ Home phone _____

Work phone _____ Cell phone _____

Best number to call during the day ☐ Home ☐ Cell ☐ Work

Housing & Income

Current housing situation ☐ Rent ☐ Own ☐ Other

If renting: Landlord's name _____ Phone _____

If other, please explain _____

How long at current address. Since _____ Number of people in the home _____

Annual gross household income (Must include all sources of income) -- **ANSWER ON ATTACHMENT** -

What pets do you have? _____ If a dog, has it ever bitten anyone? ☐ Yes ☐ No

Rent & Service

Rent you would charge _____ \$/month ☐ Not sure

Hours of service you need _____ Hours/week ☐ Not sure, or Type of service

***Attachment PLEASE ANSWER INCOME QUESTION FROM PAGE 1 OF HOMESHARING HAWAII APPLICATION BELOW. (Collecting this information assists us with some of our grants.) ANNUAL HOUSEHOLD GROSS INCOME TOTAL (INCLUDE ALL SOURCES)**

Date:

Print first and last name:

Below please check the heading that describes the number of people in your household. Under the checked heading, select the category of annual gross income (including all income sources) that best describes your household's total annual gross income.

___ One person household. (I am the only person living in my household at this time.) Select the category below that best describes your household's total annual gross income.

- A. \$0.00 - \$14,819
- B. \$14,820 - \$24,819
- C. \$24,820 – \$71,099
- D. \$71,100 or more

___ Two person household. (Me and one other person.)

Select the category below that best describes your household's total annual gross income.

- A. \$0.00 – \$20,039
- B. \$20,040 - \$30,039
- C. \$30,040 - \$81,299
- D. \$81,300 or more

___ Three person Household. (Me and two other people.)

Select the category below that best describes your household's total annual gross income.

- A. \$0.00 - \$25,059
- B. \$25,060 – \$35,059
- C. \$35,060 - \$91,449
- D. \$91,450 or more

___ Other, if four or more people live in your household including you, please state answers below.

Number in household including you _____

Household's total annual gross income (including all sources) \$ _____

Mahalo.

For reporting and statistical purposes. This information will help determine that Homesharing Hawai'i **does not** discriminate in its services.

PERSON 1

Gender: _____ Date of birth _____ Age _____

Ethnicity: ☐ Hispanic ☐ Non-Hispanic

Race: (check all that apply)

☐ White ☐ American Indian/Alaskan Native ☐ Asian
☐ Black/African American ☐ Native Hawaiian/Pacific Islander ☐ Other state:

Do you have a disability? ☐ Yes ☐ No Do you receive Medicaid? ☐ Yes ☐ No

PERSON 2 (if applicable)

Gender: _____ Date of birth _____ Age _____

Ethnicity: ☐ Hispanic ☐ Non-Hispanic

Race: (check all that apply)

☐ White ☐ American Indian/Alaskan Native ☐ Asian
☐ Black/African American ☐ Native Hawaiian/Pacific Islander ☐ Other state:

Do you have a disability? ☐ Yes ☐ No Do you receive Medicaid? ☐ Yes ☐ No

As part of our application process, we do background and reference checks and a personal interview. If you answer yes to any of the questions below, please attach an explanation.

PERSON 1

Do you have any motor vehicle violations? ☐ Yes ☐ No

Do you have any pending criminal charges? ☐ Yes ☐ No

Have you had any criminal convictions? ☐ Yes ☐ No

PERSON 2 (if applicable)

Do you have any motor vehicle violations? ☐ Yes ☐ No

Do you have any pending criminal charges? ☐ Yes ☐ No

Have you had any criminal convictions? ☐ Yes ☐ No

Other information you want us to know _____

I agree to abide by a policy of non-discrimination and agree to meet with people different than me. I hereby acknowledge that all the information I have given in this application is true and complete to the best of my knowledge and belief. I understand that providing false or misleading information will make me ineligible for the services of Homesharing Hawai'i.

Signature (Fillable form-type name to serve as your signature) _____ Date _____

If completing application for someone else, please complete below:

Name _____ Relationship to applicant _____

Phone _____ Email _____

Mailing address _____



References

Applicant's name _____ Date _____

Homesharing Hawai'i asks for references in order for us to try to find the right person for you. All references should be people who have known you at least 1 year. Together, the references should cover a span of at least 5 years to the present.

Please notify your references that Homesharing Hawai'i will be calling them.

Reference 1

Name _____

Daytime phone _____

City _____ State _____

Email _____

How long have they known you? _____

How do they know you? _____

Reference 2

Name _____

Daytime phone _____

City _____ State _____

Email _____

How long have they known you? _____

How do they know you? _____

Reference 3

Name _____

Daytime phone _____

City _____ State _____

Email _____

How long have they known you? _____

_____ How do they know you? _____

Complete, sign and mail hard copy forms to Hawaii Intergenerational Network, PO Box 279, Waimanalo, HI 96795; or Complete fillable-digital, print, sign, and mail to above address, or, scan & email to homesharinghawaii@gmail.com. Mahalo.

HAWAI'I INTERGENERATIONAL NETWORK - HOMESHARING HAWAI'I

Mail: PO Box 279, Waimanalo, HI 96795 Office: Kailua

P: 808.308.5291 E: homesharinghawaii@gmail.com

CONSENT FOR RELEASE OF INFORMATION

I, _____, authorize you to give Honolulu Information Service, Inc. and its agents orally or in writing as they request, all available information in your possession or control regarding my background including but not limited to financial, criminal, employment, and/or character history and documents. This information may include, but is not limited to, educational institution transcripts or records of academic achievement, reports from prior employers and reports from other people who can give information relative to my character and integrity.

I hereby release all prior employers and other sources of information from any and all liability arising out of their furnishing information to the above-named organization and/or their agents regarding my employment and/or references. This release extends to any and all causes of action, claims for relief, liability, liabilities, costs, expenses, compensation, attorneys and other fees, demands, injuries, losses, loss of services, loss of profits, exemplary damages, punitive damages, statutory penalties, interest, attorneys' fees and costs and damages of whatever name or nature, resulting from the provision of information in reliance on this Consent.

It is agreed that a photocopy of this authorization is to have the same force and effect as the original.

Applicant's Signature

Date

Print Applicant's Name

Applicant's Social Security Number

Address

Date of Birth

Hawai'i Intergenerational Network - PO Box 279, Waimanalo, HI 96795
Well-being and Covid 19 Precautions Commitment for
Homesharing Hawai'i Home Owners and Home Seekers 6-1-2021

Hawai'i Intergenerational Network (HIN) is dedicated to community well-being and successful home sharing. Given the Covid 19 Pandemic, HIN has prepared this Well-being Commitment for HIN Homesharing Hawai'i Home Owners and Home Seekers to affirm they will follow local, state and federal guidance, mandates and laws, as well as practice below personal precautions to prevent exposure and/or spread of Covid 19 and strive to keep each other safe while home sharing.

My name is _____, and I am a (Check one:
(print name)

____ home owner or ____ home seeker), participating with the Hawaii Intergenerational Network's Homesharing Hawai'i program. While a HIN Homesharing Hawai'i participant, I strive to keep others safe and I commit to:

- Read the 2 page CDC Guidance on "Living in Shared Housing," provided by HIN;
- wear a cloth mask and stay 6 feet away from others when, in a room with two or more people not in my family or household bubble, meeting a potential home sharing match, sharing a home in a trial period;
- wear a cloth mask and keep 6 feet away from house mate in home for the first 14 days of homesharing, in addition to above;
- sanitize my hands each time, before entering the home, after returning from necessary outside errands;
- Take daily preventative actions including but not limited to: wash hands frequently for 20 seconds each time, avoid touching eyes, nose and mouth, stay at least 6 feet away from others, stay home when sick, cover cough or sneeze with a tissue and throw it in trash, clean and disinfect frequently touched objects and surfaces, and wear a cloth fask mask when in public;

- always have a supply of hand sanitizer, tissues, sanitizing wipes to use each time I touch surfaces or use equipment or appliances in common areas such as kitchen or bathroom;
- isolate myself in my bedroom, notify my housemate and call my medical professional about Covid testing should I have a fever or feel sick with any Covid 19 symptoms;
- abide by any Covid 19 precautions requested by housemates; and
- stay informed and follow local, state and federal guidance, mandates and laws to prevent exposure and/or spread of Covid 19 to keep each other safe while home sharing.
- Check one. ____ I am fully vaccinated against Covid 19. ____ I will be fully vaccinated against Covid 19 on or about _____ (date). ____ I do not intend to get vaccinated.

Home Owner or Home Seeker Signature

Date

*Note: This Commitment will be periodically updated by HIN as necessary.

**Provide copy for HIN and Board Member, Other Volunteer or Contractor