

1. Enquirer's Details

Name of person making enquiry	Click to enter text
Email	Click to enter text
Phone	Click to enter text
Relationship to Participant	Click to enter text

2. Participant's Details

Participant's name	Click to enter text		
Date of birth	Click to enter text	Gender	Click to enter text

3. Funding Details

Is the Participant SIL eligible?	<input type="checkbox"/> Yes <input type="checkbox"/> No *This will usually appear as a "Housing goal" in their NDIS plan	
If no, has SIL been applied for?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
Do they have SDA approved in their NDIS plan? If so, what level?	<input type="checkbox"/> Yes – Basic <input type="checkbox"/> Yes – Fully Accessible <input type="checkbox"/> Yes – High Physical Support	<input type="checkbox"/> Yes – Improved Liveability <input type="checkbox"/> Yes - Robust <input type="checkbox"/> No <input type="checkbox"/> Unsure
If no, has SDA been applied for?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	

4. Home Preferences

Preferred location	Click to enter text
Secondary location	Click to enter text
Preferred housing type	<input type="checkbox"/> Group Home <input type="checkbox"/> Villa

5. Support Needs

What is the participant's disability?	Click to enter text
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Does the participant have any medical support needs?	<input type="checkbox"/> Yes – Please list below <input type="checkbox"/> No
	Click to enter text
Does the participant have any mobility support needs?	<input type="checkbox"/> Yes – Please list below <input type="checkbox"/> No
	Click to enter text
Does the participant have any Restrictive Practices?	<input type="checkbox"/> Yes – Please list below <input type="checkbox"/> No
	Click to enter text

Thank you for completing this form a team member will contact you shortly to discuss potential homes.

To assist with the application process and ensure we understand the Participant needs we will be requesting and requiring some of the supporting documentation listed below:

1. Behaviour Support Plan, including Restrictive Practices if there are any
2. OT Functional Housing Report
3. NDIS Plan showing SDA (If applicable)
4. Any other clinical reports such as: Speech report; Nutrition and swallowing; Psychology
5. Any medical reports such as: Diabetes; Epilepsy
6. Mobility reports