

Opportunity Village Eugene (OVE)

Date: _____

Applicant Name: _____

(Please Print clearly)

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Below For Vetting Committee Use Only

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Date

Application Received By Vetting _____

Background Check Done _____

Background Check Outcome _____

Vetting Review Done _____

Reviewers response

Initial: _____ Candidate(Y/N): ____

Initial: _____ Candidate(Y/N): ____

Initial: _____ Candidate(Y/N): ____

Initial: _____ Candidate(Y/N): ____

Initial: _____ Candidate(Y/N): ____

1st Contact for Interview _____

2nd Contact for Interview _____

3rd Contact for Interview _____

Interview Date _____

Resolution and Date _____

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Community Agreement

Opportunity Village is a transitional village that provides a safe and secure place to be for those currently without housing. It is a self-governing community that is based on five basic rules:

- 1. No violence to yourselves or others**
- 2. No theft**
- 3. No alcohol, illegal drugs, or drug paraphernalia**
- 4. No persistent, disruptive behavior**
- 5. Everyone must contribute to the operation and maintenance of the Village.**

This is a community that relies on the participation of all Villagers. Your behavior has an effect on all others. OVE puts a stress on positive behaviors that benefit the community. Residents must be a positive member of this community and contribute toward making it a safe, secure, clean and pleasant place to live.

I agree to the following:

- What I do will be based on respect for myself and others.
- I will not disrespect others based on ethnicity, religion, gender, gender identity, sexual orientation, disability, lifestyle choices, or economic status. We all have the right to expect dignity and opportunity.
- I will help make OVE a place where everyone feels safe and respected.
- For my own safety as well as the safety of others, I will not carry a weapon on OVE premises or act violently toward other residents or myself. This includes all knives with the exception of small pocket knives with less than a 3 - 7/8" blade.
- Since stealing is one of the most upsetting things that can happen in our community, I will not steal and will make the members of the Village Coordinator aware of any stealing I see. I will respect other people's property and community property and I expect other people to respect mine. This includes food and clothing that may be left out in the common areas.
- I know that illegal drugs and alcohol use can damage my community. I agree not to use illegal drugs or alcohol on village property. Some in the community are in recovery and I will respect their need for a clean and sober community.
- I will adhere to quiet hours from 10PM to 7AM throughout the village, including private and public spaces, so that others and myself can stay healthy and rested. I understand that no personal guests will be allowed during that time.
- I agree to live in a clean, litter-free space where I can bring friends, family and other guests. Also, I know that many communities such as ours get closed down for "health and safety" reasons. I will keep the area in and around where I live clean and orderly, and not store any personal items outside of my building footprint or allocated storage space. I will help keep the community areas clean, including the kitchen. I will wash my dishes and will pick up after myself and my pet, if I have one, and keep my pet leashed at all times. I understand that only a limited number of pets will be allowed in the Village in order to maintain an orderly environment. I agree that my unit can be inspected by SOV staff with prior notice.
- I understand that in order to maintain a secure environment there will be a single point of entrance and exit to and from the Village that will be staffed 24/7, and that front desk shifts will be shared equally among Village residents.
- In the event that I am allocated an electrical cord for medical purposes, I agree to use only an SOV-certified cord and only for the verified medical purpose. I agree to the additional \$10 increase to my monthly program fee for use of the electrical cord.
- I understand that this is a transitional shelter and is not intended as a permanent dwelling. The units provided do not include electricity or plumbing and are not considered habitable under landlord/tenant laws.
- I know that it can take a lot of work to keep the Village a safe, clean and pleasant place to live. I agree to take responsibility for at least 10 hours a week on the operation and maintenance of the Village (8 hours gate duty and 2 hours of additional service). This includes serving on security teams, helping with kitchen and bathroom cleanup duties, construction projects, maintenance

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and clean-up crews, village “community service” projects, helping plan activities and other jobs that need to be shared by community members. In addition, I agree to clean the bathrooms at least once a month.

- I also know that there are financial costs to keep the Village running. I will support the goal of self-sufficiency by contributing \$35 per month by the 10th day of each month. This contribution is mandatory but it is not rent. It is a contribution to the cost of consumable utilities, electricity, water, sewer, heat in the yurt, and internet. Occasionally, I may be able to earn a monthly program fee credit by working at a SquareOne Villages fundraising event, a village maintenance project, being a task captain, or similar. (This requires a signed contract with the village coordinator.)
- I will attend the weekly Village meetings, unless I have an approved reason for absence, in which case I will find out what went on by reading the meeting notes. Absence approvals must be renewed every three months. I understand that decisions will be made through a majority vote, and that the Board of Directors of the nonprofit reserves the right to override decisions made. I agree to abide by all decisions made.
- I will strive for positive relationships with residents, staff, and volunteers. If I have a conflict with a resident, a staff person, or a volunteer, I will try to work it out with that person. If this doesn't work, I will agree to participate in a conflict resolution process as directed by a staff person.
- I affirm that I have completed the Background Check Form honestly along with all other application documents. I understand that if the background check reveals otherwise, I could be asked to leave immediately.

I promise to keep all of these agreements, and use the appropriate procedures and processes outlined in the Village Manual, as well as others that are approved at Village meetings.

If I violate any agreements, SOV staff are authorized to ask me to leave temporarily, or, in serious or repeat cases, to leave permanently. I will do so peacefully and not return unless I am authorized to do so. Should legal proceedings need to be taken against me, it will be at my own expense and will result in both a negative housing reference and a legal blemish on my record.

I know that Opportunity Village is a place where people value community and support each other. I will try to think of ways to make our community a better place to be. When I am concerned or upset with situations in the Village, I will bring these problems to the attention of the appropriate people so that we can work together to figure things out. Everyone must contribute to the operation and maintenance of the Village.

I willingly sign this agreement is a contract between myself, other OVE residents, and SquareOne Villages, and I have provided a picture id or signed photo of myself to confirm my identity. Should notice need to be given for violation of this agreement, it will be delivered person-to-person, placed in the secure mailbox on my unit, or by first class mail.

Name (Signature): _____

Date: _____

Application & Intake Questionnaire

Date: _____

Legal/Given Name: _____

Name Used: _____

Race/Ethnicity: _____ Gender: _____ Preferred Pronouns: _____

Driver's License/State ID number: _____ State issued: _____

How do we contact you?

Phone: _____

Email: _____

Where did you sleep last night: _____

Date of birth: _____ Circle one: Single / Married / Partnered

Is your spouse/partner applying to OVE? Yes / No

If so, spouse/partner's name: _____

*Couples must agree to abide by the intervention policy in the Village Manual if they have a fallout which results in one person moving out of a couple's unit. This must be filled out during the interview process. Please choose which person in the couple will move out below:

"We, the couple, in the event of a fallout resulting in an inability to live together and causing one person to move out of couple housing, will agree to village policy that _____ will move out of the couple's unit until a single's unit is available."

Do you know any current OVE villagers, if so who? _____

Do you have a pet? Yes/No

If so, what kind? _____ How many pounds? _____ Spay/neuter? Yes/No

1. How did you become unhoused? _____

2. How long have you been without stable housing? _____

3. Where was your most recent permanent address? _____

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4. How long have you been in the Eugene/Springfield Area? _____

5. What other states have you lived in? _____

6. Is this your first experience being unhoused? _____

7. Do you have a source of income? Yes / No If so, what source? _____

8. Have you ever lived in a rest stop, homeless village or other community environment? Yes / No
If so, which one and for how long? _____

9. Are you employed? Yes / No If so, where and how many hours/week? _____

10. What goals do you have for yourself? _____

4. Have you worked for pay? Yes / No If so, what kinds of work have you done?

5. What is the best job you ever had? _____
Why? _____

6. What are your hobbies? _____

Please provide an Emergency Contact:

_____	_____	_____
Name	Phone	Relationship

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Background Check Form

Notice: We will conduct a background check on all applicants. If that background check does not match your answers on this form, your application to live in Opportunity Village Eugene will be denied. The only criminal offenses that automatically exclude are forcible/aggravated rape and sexual predation on children. PLEASE BE HONEST!

Last Name: _____ First Name: _____ Middle Name: _____

Date of Birth: _____ Last 4 digits of SSN: _____

Have you ever been convicted of a criminal offense? Yes / No

If yes, please state the City/Town, County and State, the date of the conviction, and charges you were convicted of. (Please use the back of the sheet if you need more room).

- 1. _____

City, State, County	Date/Yr	Offense
---------------------	---------	---------
- 2. _____

City, State, County	Date/Yr	Offense
---------------------	---------	---------
- 3. _____

City, State, County	Date/Yr	Offense
---------------------	---------	---------
- 4. _____

City, State, County	Date/Yr	Offense
---------------------	---------	---------
- 5. _____

City, State, County	Date/Yr	Offense
---------------------	---------	---------
- 6. _____

City, State, County	Date/Y	Offense
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The information on this form is true and accurate to the best of my knowledge. I give permission to verify all information provided.

Applicant Signature

Date

OVE Representative

Date