

Key Worker Application Form



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Please answer the following questions so that we can allocate the most suitable accommodation for your requirements.

Employment Start Date	
Location	
Requested Move in Date	
Expected Length of Stay in Clarion Housing Accommodation	

Please affix passport photo here if printing and scanning form.

If completing the form electronically please email a photo separately as an attachment.

Please number the scheme and property sizes that you wish to apply for: **1** for most preferred to **5** for least preferred.

Properties

St Giles House, Camberwell, SE5 7UD Double Studio	
Grove Vale, East Dulwich, SE22 8DT / SE22 8AU Cluster Rooms / Single	
Hanover Park, Peckham, SE15 5HD/E Single Studios	
Bertha James Court, Bromley, BR2 9HE/J Cluster Rooms	
Clarence Lodge, Bromley, BR6 8RE Cluster Rooms	

Size of Property Required

Cluster Room: max 1 person	
Single Studio: max 1 person:	
Double Studio: max 2 people	

Applicant Personal Details

	Applicant 1				Applicant 2 – Only applicable for St Giles House Double Studio			
Title (Mr / Mrs etc.)								
First Name/s								
Surname								
Previous Name/s								
Date of Birth								
National Insurance Number								
Current Address								
Postcode								
Tenure Type (Tenant/Friends etc.)								
Length of Stay		Years		Months		Years		Months
Home Telephone Number								
Mobile Telephone Number								
Email Address								
Preferred Method of Contact								

Please complete all of the following sections, type in relevant information where required and use an **X** in 'Yes/No' answer columns.



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Household Information – **Applicant 1**

Applicant 1	Yes	No
If female: Are you currently pregnant?		
What is your Nationality?		
Do you have permission to enter or remain in the UK?		
Are you subject to immigration control?		
If you are subject to immigration control, please provide your VISA expiry date		

Household Information – **Applicant 2**

Applicant 2	Yes	No
If female: Are you currently pregnant?		
What is your Nationality?		
Do you have permission to enter or remain in the UK?		
Are you subject to immigration control?		
If you are subject to immigration control, please provide your VISA expiry date		

	Yes	No
Are you employed by Clarion Housing?		
Are you related to a member of the board or an employee of Clarion Housing?		

Tenancy Reference

If you are currently in rented accommodation please provide the following details so that we can contact your landlord/agent for a tenancy reference.

Landlord/Agent Title	
Name(s)	
Address	
Postcode	
Telephone number	
Email Address	
Length of Tenancy	

Previous Addresses

Please confirm address details for all applicants for last five years. We require tenancy references for **all** tenancies held in the past two years so please provide landlord/agent contact details where applicable.



From	To	Address	Tenure	Landlord Name, Number and Email

	Yes	No
Have any of the household members ever had loan arrears, County Court Judgements, defaults, or been declared bankrupt?		
Are any of the household members in receipt of benefits? Details and proof of benefits are required.		

Household Expenditure

	Yes	No	Monthly Cost
Credit and/or Store Cards			
Loans			
Property Rent			
Council Tax			
Combined Utility Bills			
Child Care/ Child Support			
Phone Contract			
Travel			

Employment Information



Please provide employment and referee details for your employment with Kings, PRUH or SlaM during your stay in Clarion Housing accommodation.

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Applicant 1: Employment Status

	Yes	No
Is Applicant 1 in Employment?		
Full-Time		
Part-Time		
Permanently Employed		
Subject to a Probationary Period		
Fixed Term Contract / Temporary		
Job Title		
Salary	£	

Applicant 1: Employment Referee

Name	
Job Title	
Contact Number	
Contact Email Address	

Applicant 2: Employment Status

	Yes	No
Is Applicant 2 in Employment?		
Full-Time		
Part-Time		
Self Employed		
Permanently Employed		
Subject to a Probationary Period		
Fixed Term Contract / Temporary		
Job Title		
Salary	£	

Applicant 2: Employment Referee

Name	
Job Title	
Contact Number	
Contact Email Address	



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Rejection and Exclusion Policy

Does one or more of the criteria listed below apply, or has it applied during the last 6 years, to you and/or members of your household?

	Yes	No
The use of violence or the threat of violence against any tenant, employee, board member or agent of Clarion Housing, or anyone else lawfully on the estate		
Harassment of others, as listed immediately above		
Arson		
Causing wilful damage to property		
Forfeiture of a probationary tenancy		
A history of anti-social behaviour		
A record of repetitive car crime, burglary or other criminal damage		
A history of drug related offences		
A record of offences against children		
A record of other criminal offences that have a relation to community matters		
A conviction for a criminal offence, other than a spent conviction under the Rehabilitation of Offenders Act 1974		

If yes please give details including the date of offence plus the name and address of the probation officer.

Informed consent form

I agree to provide Clarion Housing with a copy of my credit file to confirm the financial information I have provided in this application form.

I understand that the information will be used to assess my suitability for a Keyworker property in accordance with the eligibility criteria set down by Clarion Housing. I acknowledge that completing this form does not guarantee an offer of a property.

I hereby authorise my employer to provide details of my earnings, dates of employment and any court orders deducted from my salary.

☐

Please cross to confirm

Statement

The information provided on this form will be used to assess your suitability for a tenancy under the Keyworker scheme. The information will be kept secure and confidential as required by the Data Protection Act 1998.

We will check the information you have supplied to confirm its accuracy and we will request employment details from your employer and tenancy references, but only with your consent.

We may share the information with other members of the Clarion Housing Group and with any public bodies where we are required by legislation to assist in the prevention and detection of fraud; for example with the police.

☐

Please cross to confirm

Declaration

I confirm that I have completed the Informed consent form with this application. I confirm that the details given in this application are true. I understand that if I have knowingly or recklessly given any false information, or withheld information in connection with this application, my accommodation may be repossessed by virtue of Schedule 2 of the Housing Act 1985 (as amended).

☐

Please cross to confirm



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Please confirm the location of your NHS Foundation Trust post

Kings College / Princess Royal Hospital

☐

South London & Maudsley NHS Foundation Trust

☐

Signatures

Applicant 1		Date	
Applicant 2		Date	
Accommodation Manager		Date	