



Region of Waterloo

COMMUNITY SERVICES

Community Housing Access Centre (CHAC)

Phone: (519) 575-4400 TTY: (519) 575-4608

Email: housingapplication@regionofwaterloo.ca

Website: www.regionofwaterloo.ca/chac

Address: 20 Weber St E, Kitchener, ON N2H 1C3

Request for Escaping Violence Status

What is Escaping Violence Status?

Escaping Violence Status may be assigned to an applicant household who meets all of the criteria for Special Priority for Victims of Domestic Violence with the exception of proof of co-habitation OR is presently experiencing exceptional risk due to criminal activity.

Who is eligible for Escaping Violence Status?

Any member of a household applying for community housing in the Region of Waterloo may request the household be given the Escaping Violence Status. Only applicant households who satisfy the Escaping Violence criteria as noted above, who have resided in the Region of Waterloo for the last 12 consecutive months, exhausted their market rent housing options and have a monthly income that is less than the amounts listed below will be considered for this status.

The Household income cannot exceed the following:

Unit Size	Maximum Monthly Income
Bachelor	\$1,925
One Bedroom	\$2,525
Two Bedroom	\$3,050
Three Bedroom	\$3,400
Four + Bedroom	\$4,175

* Effective: January 1, 2025

How to Apply

• **If you are not currently on the waiting list for Community Housing**, you must complete the Application for Community Housing along with the request for Escaping Violence Status.

Copies of both forms are available on our website at:

<https://www.regionofwaterloo.ca/en/living-here/find-affordable-housing.aspx>

For other options on how to obtain the forms, please contact our Service First Contact Centre by calling **519-575-4400**.

• **If you are already on the waiting list for community housing**, you will only need to complete and submit the Request for Escaping Violence Status.

Applicant Contact Information

Full Name:		Telephone #:	
Email:			
Street address:		Unit #:	
City:	Province:	Postal Code:	
Alternative contact person's name and number:			

Declaration and Consent to Disclosure

This section must be completed by the applicant who is applying for Escaping Violence status on behalf of the household. If that person is unable for any reason to sign the consent or to give valid consent, the consent may be signed on their behalf by: the parent or guardian, a power of attorney that gives consent on their behalf; or a person who is otherwise authorized to give the consent on their behalf.

I request that my application be given Escaping Violence Status on the waiting list.

I confirm that all the information provided on this form is true and complete.

I understand that all information I give to CHAC will belong to them.

I, _____, hereby authorize and consent for CHAC to verify all information and documents provide to access my eligibility for Escaping Violence Status. That includes permission to contact the issuer of any supporting documentation.

I hereby authorize _____ my, _____ to
(Name of Professional) (Professional relationship (i.e.: doctor))

Complete this form and consent to the disclosure of any supporting information requested by CHAC to assess my application.

Applicant's Signature:

Date:

Parent/Guardian's Signature:

Date:

Personal information contained on this form is collected under the authority of the Housing Services Act, 2011 and subject to the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. M.56. The information will be kept confidential and used only for the purpose of assessing eligibility for Escaping Violence Status.

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Professional Verification of Escaping Violence Status

Information for Professionals Providing Verification of Escaping Violence Status

In order to request Escaping Violence Status, this form must be completed by a qualified professional in the **domestic violence or justice system** who can verify that the household meets the Escaping Violence Status criteria. If an Application for Community Housing has not already been submitted, please ensure one is completed. Only those households who are eligible for community housing will be considered for this status.

CHAC relies on the assessment and written verification of escaping violence from a professional to ensure applicants meet all the eligibility criteria for this status.

Information about Verifier

Professional's Information and Declaration:		
Full Name:	Position/Title:	
Professional Designation:	Registration / License Number:	
Organization:		
Street Mailing Address:		Unit #:
City:	Province:	Postal Code:
How long have you known/worked with the applicant in a professional capacity?		

Declaration of Verifier

		YES	NO
I have a professional relationship with the applicant that extends beyond completing this verification of Escaping Violence Status.		<input type="checkbox"/>	<input type="checkbox"/>
I have reviewed the information on this form and in my professional capacity have assessed and verified my client is a victim of Escaping Violence Status and meets the criteria for this status.		<input type="checkbox"/>	<input type="checkbox"/>
Please provide details about the situation the applicant is experiencing and why they are applying for this status.			
<p>Is there any other information you would like to share about this person's current situation to support this request?</p>			
Professional's Signature:		Date (mm/dd/yyyy):	
Name of Supervisor:	Supervisor's Signature:	Date (mm/dd/yyyy):	

Important Note: The applicant's request for this status cannot be considered without this completed form.