



UNITY IN
COMMUNITY

The Brooks Residence, Ottawa, ON

Unity In Community Group Home Application Form

Supporting young people aged 16-24 at risk of involvement or involved with the criminal justice system

Date completed:	Source of referral:
Legal Name:	Preferred Name/Pronouns:
Phone #:	Permission to call /leave voicemail: YES <input type="checkbox"/> NO <input type="checkbox"/>
Date of Birth:	Client email: Referral email:

Is the applicant currently living in Ottawa? Describe their most recent living situation, if housed:

Emergency contact information

Name:	Phone #:
Relationship:	Can we leave a message? YES <input type="checkbox"/> NO <input type="checkbox"/>

Tell us about yourself

This section helps us understand how to best support the individual. Please check any experiences, identities, or concerns that may be relevant to care planning.

- Racialized Identity (e.g. Black, Indigenous, Person of Colour). Details (tribe, ethnicity): Click or tap here to enter text.
- Newcomer or refugee to Canada, if yes, what is your status: Click or tap here to enter text.
- 2SLGBTQIA+ identifying
- Substance use concerns
- Safety concerns (e.g., housing, community, threats). Describe: Click or tap here to enter text.
- Involvement with child protection (e.g., CAS). If yes, who is their CAS worker: Click or tap here to enter text.

Please submit this form to info@unityincommunity.ca. We will contact you soon to discuss the referral.



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What is their status (TCA, crown ward, etc.)? Click or tap here to enter text.

What is the applicant's source of funding for services?

If funding is pending, please provide expected source and timeline:

Legal & Support Involvement

If applicable, please provide information about any current or past involvement with the legal system or support professionals. This helps us coordinate care, understand responsibilities, and ensure the individual receives consistent and informed support.

Is the applicant currently involved in the Criminal Justice System? YES NO

If yes, please describe the current disposition (e.g., probation, court involvement):

Probation officer or caseworker name and contact info:

Upcoming court appearances:

Does applicant require transport to meetings? If so, please indicate frequency:

Please list other supports (e.g. Counsellor, Housing, Medical):

Context for Referral

Please provide a brief explanation of the context and client profile. Include any relevant history, current needs, and goals for placement at the group home.

Note: Please attach any supporting documentation (e.g., risk assessments, case plans, etc.), if available.

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Example: Applicant is currently on probation and experiencing housing instability after being discharged from a detention facility. They have no stable place to live and are at risk of reoffending. Applicant has expressed interest in returning to school and receiving mental health support. Referral is being made to provide a structured, supportive environment where they can work on life skills, education, and rehabilitation goals.

Is there supporting documentation attached to this application? Yes No

Primary reasons for referral (check all that apply):

<input type="checkbox"/> Housing Instability	<input type="checkbox"/> Physical Health
<input type="checkbox"/> Justice Involvement	<input type="checkbox"/> Life Skills
<input type="checkbox"/> Mental Health	<input type="checkbox"/> Other:
<input type="checkbox"/> Family Instability	

Additional information

Are there any other life-skills you would like support with?

Applicant Signature:

Date:

Worker's Signature:

Date:

Thank you for considering Unity in Community Group Home: Brooks Residence. We look forward to working with you.

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