

Children and Dependants Section

Please complete this section if you have children aged under 16 or people who you support financially and will live with you.

For children aged 16 and above, or people who will live with you but do not depend on you financially, please complete the **Residents Section**.

You must answer all questions unless they are optional.

Personal Details

Full legal name

Date of birth

Gender

Relationship to you

Are they a citizen/resident of Australia with no time limit?

Yes

No

Percentage of care

Do they identify as
First Nations?

Yes

No

I don't wish to answer this question

Health and Wellbeing

We can support household members with health and wellbeing requirements. Please tell us if they have medical needs, health issues or disabilities which significantly affect your housing need.

Please include evidence to support your answers in this application. You can use the evidence checklist to check if you have suitable documents to support your application.

You can also provide the Medical Support Form to their medical professional. Return it to us after it has been completed.

Does this person have any significant disability or health conditions that affect your ability to find suitable housing?

No (*end of section*)

Yes

Please select the type of condition(s)

Intellectual/learning

Sensory/speech

Physical health, disability or
neurodiverse

Psychosocial/
mental health

Trauma*

*Trauma includes past incidents of domestic violence, childhood abuse or torture which still affects their wellbeing.



Please select the option that best describes how this person's condition(s) impact your ability to find other housing options:

(select one option only)

The condition(s) have a temporary or short-term effect.

A short-term effect may include an injury, surgery recovery period or condition(s) that improve with treatment.

The condition(s) have an ongoing moderate effect.

An ongoing moderate effect may include condition(s) which can be managed with ongoing treatment but affects your ability to work or live in shared accommodation.

The condition(s) will worsen and have an increasing effect.

An increasing effect means the condition(s) are degenerative or will continue to get worse over time, making it harder for you to work or find suitable housing.

The condition(s) have an ongoing major effect.

An ongoing major effect generally means you receive the Disability Support Pension (DSP) or Aged Pension and need constant support to manage day-to-day living.

Please select the option that best describes the level of support this person needs to manage day-to-day living:

They need someone to help them shower, cook, clean, shop or participate in activities.

(select one option only)

They do not need any support

They need support occasionally or in periods of unwellness

They need support on a regular basis but not full-time

They need full-time or intensive support

Do they need an overnight carer?

They have strong health or disability reasons for a Registered Carer to stay overnight.

No

Yes

How many overnight stays are needed each week?

