

**VICTORIA WOMEN'S TRANSITION HOUSE SOCIETY  
THIRD-STAGE SUPPORTIVE TRANSITIONAL HOUSING:  
EXPRESSION OF INTEREST FORM**



**What is VWTH Third-Stage Supportive Transitional Housing?**

The Victoria Women's Transition House Society (VWTH) offers supportive transitional housing for a maximum of 3 years for single women generally between the ages of 45-65 and who have left an abusive intimate partner relationship.

**Who is eligible? A woman who:**

- Has left an abusive intimate partner relationship, within the last 5 years
- Is single with no dependent children
- Is generally between the ages of 45-65
- Has Income below \$39,800. per year
- Has been out of the abusive relationship for a minimum of one year
- Must be prepared to participate in programs and services offered
- Must have supports in place for existing or previous health, mental health, and addiction challenges
- Has stable health, mental health, and/or addiction challenges
- Has successfully been in recovery without a relapse for a period of 2 years

**How much is the rent?**

- If the tenant receives income assistance, the rent is based on the maximum shelter allowance
- If the tenant is in receipt of income from employment or other sources, the rent is based on 30% of gross income (Minimum rent applies)

**How can I access this program?**

- Complete and sign the attached Expression of Interest form
- Email, mail, or fax the Expression of Interest form to Victoria Women's Transition House Society

**Next Steps**

- If you meet the program requirements, you will be invited to attend a Program Orientation
- If the program appears to fit your needs, then an application form will be provided
- If determined eligible, you will be invited to an interview
- References and financial eligibility will be reviewed
- If accepted into the program, you will be placed on a waiting list and contacted when a vacancy arises
- All information received related to your application will be kept confidential
- Your application form will be kept for a 1-year period

**Submit the Expression of Interest form to:**

***Victoria Women's Transition House Society***

***Third Stage Housing Program***

**Phone:** (250) 385-2103 **Mail:** #100 - 3060 Cedar Hill Road, Victoria, B.C. V8T 3J5

**Fax:** (250) 385-2104 **Email:** harrisonplace@vwth.bc.ca

**VICTORIA WOMEN'S TRANSITION HOUSE SOCIETY THIRD-STAGE  
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**1. Contact Information of Potential Applicant**

Surname	First Name
Email Address	Phone Number

**2. How did you hear about our housing?** \_\_\_\_\_

**3. Check the boxes that reflect your circumstances:**

- I am a single woman between ages 45-65 ,
- if not between ages 45-65 please explain \_\_\_\_\_
- I have no dependent children living with me
- My income is less or not much more than \$39,800/year
- I have left an abusive intimate relationship between approximately one and five years ago
- I am willing to take part in VWTH programming and services
- I consider myself stable regarding existing and previous health, mental health, and/or addiction challenges
- If I have a history of addictions I have been in recovery without a relapse for a period of two years
- I have supports in place to assist me with any of the above challenges

**4. Please describe your current housing circumstances (e.g. transition house, living with friend/relative, etc.)**

\_\_\_\_\_  
\_\_\_\_\_

**5. Briefly describe your reason for expressing interest in VWTH Third-Stage Supportive Transitional Housing.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**6. Contact Consent** – to receive emails/calls related to your application, please agree to the statements below:

- I would like to receive communications from VWTH by email
- I would like to receive communications from VWTH by phone
- I consent to voice messages at the phone number provided

**7. Expression of Interest agreement** – Please read and sign the following statement:

I understand that this Expression of Interest Form does not constitute an agreement on the part of VWTH to provide me with rental accommodation. I understand that it is my responsibility to advise VWTH of any changes given to the information above by updating and re-submitting this form. I understand that if I have not contacted the program for one year, my Expression of Interest and application form will be cancelled.

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_