

**Colorado Loving Care  
1776 South Jackson Street Denver, Colorado 80210 #405  
Host Home Provider Application**

**Single Applicant**

<b>Full name</b>	
<b>Date of birth</b>	
<b>Gender</b>	
<b>Social security number</b>	
<b>Phone number</b>	
<b>Email address</b>	
<b>Full Address</b>	
<b>Are you eligible to work in the USA?</b>	
<b>Preferred way of contact</b>	

**Household Members**

A background check is required of all adults (18 years and older) living within a Host Home

<b>Name</b>	<b>Date of birth</b>	<b>Relationship</b>

<b>Have you or any member of your household been arrested for violations of the law other than minor traffic violations? If yes, please explain</b>

## **Housing**

<b>Housing type (House, Apartment, Condo, Other)</b>	
<b>Do you rent or own</b>	
<b>Number of bedrooms</b>	
<b>Number of bathrooms</b>	
<b>Does your home have a wheelchair ramp</b>	
<b>Does your home have handrails and grab rails installed</b>	
<b>Is there a bed room on the main floor</b>	

<b>Please provide any additional information which describes the degree to which your home is accessible inside and outside</b>

<b>Would you need to change your current residence before starting a Host Home?</b>	
<b>How much notice would you need to move, if necessary?</b>	

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**Vehicle and Driving**

If selected for a host home, applicants must provide proof of current auto liability insurance.

<b>Vehicle Type</b>	
<b>Make</b>	
<b>Model</b>	
<b>Year</b>	
<b>Number of seats with seatbelts</b>	
<b>Do you have a valid driver license</b>	
<b>Driver license number</b>	
<b>State where issued</b>	
<b>Driver license expiration date</b>	

**Education**

<b>Highschool graduate</b>	
<b>College graduate</b>	
<b>Languages spoken</b>	

<b>Please share other specialized training or certifications</b>

## **Employment**

Please begin with most recent

<b>Company name</b>	
<b>Address</b>	
<b>Length of employment (Dates)</b>	
<b>Supervisor Name and Contact</b>	
<b>Job title and duties</b>	
<b>Reason for leaving</b>	

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**Personal References**

<b>Full name</b>	
<b>Relationship</b>	
<b>Phone number</b>	
<b>Email address</b>	

<b>Full name</b>	
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### **Pre-interview questionnaire**

**Have you been employed by Colorado Loving Care, LLC previously?**

**Have you ever provided Host Home or Foster Care Services? If yes, what Service Agency or County?**

**Does anyone living in your home currently have a communicable disease? If Yes, please explain**

**Have you or has any member of your household been convicted of a felony, child abuse, or an unlawful sexual offense? If yes, name of person & related offense**

**Why are you interested in providing a Host Home?**

**What qualities do you feel a Host Home should provide for a disabled adult?**

**Do you have any experience or exposure to the Developmental Disability community? If so, please describe**

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<b>When would you be available to begin providing care?</b>

<b>Could you care for an adult who cannot be left unattended?</b>

<b>Do you have any obligations that would require you to be away regularly during the day or evening? Please describe</b>

<b>I could best serve and support an individual who has the following qualities</b>			
<b>Physical aggression</b>		<b>Male</b>	
<b>Theft</b>		<b>Female</b>	
<b>Property destruction</b>		<b>Non verbal</b>	
<b>Elopement</b>		<b>Uses wheelchair</b>	
<b>Verbal aggression</b>		<b>Uses Walker or cane</b>	
<b>Sexual Behaviors</b>		<b>Has pet</b>	
<b>Behavioral/Mental Health</b>		<b>Medically involved/Fragile</b>	
<b>Independent</b>		<b>Age under 21</b>	
<b>Age 21 - 60</b>		<b>Age above 60</b>	

**I certify that I have truthfully answered the above questions to the best of my ability. I understand that providing false or misleading information may result in the cancellation of my Host Home Agreement certification.**

<b>Signature</b>	<b>Date</b>