## **General Information**

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| **The City of Toronto’s Housing Secretariat division** manages the Centralized Waiting List for subsidized housing.Special Priority Program (SPP) status is reserved for individuals eligible for Rent-Geared-to-Income (RGI) assistance who are victims of abuse or trafficking as defined below:   * **“Abuse”** means one or more incidents of: physical or sexual violence, controlling behaviour; OR intentional destruction of or intentional injury to property; OR words, actions or gestures that threaten a household member to fear for his or her safety; and that are done by specific individuals. OR trafficking of the member done by any individual. * **“Trafficking”** means, with respect to a member of a household, one or more incidents of recruitment, transportation, transfer, harbouring or receipt of the member by improper means, including force, abduction, fraud, coercion, deception and repeated provision of a controlled substance, for an illegal purpose, including sexual exploitation or forced labour.   The *Housing Services Act, 2011,* Ontario Regulation 367/11, Section 52 - 58 (“Special Priority Household Category”), gives priority ranking to social housing applicants and/or tenants whose personal safety, or whose family’s safety is at risk because of abuse by an individual with whom they currently or recently lived with, or who is sponsoring the member as an immigrant. This Special Priority is to enable the household to separate permanently from the abuser. Social housing applicants are also eligible for Special Priority if a member of the household is being or has been trafficked.  If you are eligible for Special Priority status, you will be ahead of non-priority applicants on the Centralized Waiting List, but you will still be behind Special Priority applicants who applied before you. We cannot tell you how long it will take to get housing. The amount of time it takes to house a Special Priority applicant depends on where you hope to live and the type of unit you need.  **Special Priority Program (SPP) Application**  In order to qualify for Special Priority status, you must:   * Be eligible for Rent-Geared-to-Income assistance. * Meet the criteria for either domestic violence, sponsorship abuse or human trafficking   **Domestic Violence and Sponsorship Abuse Criteria**   * You are living with someone who is abusing you or your children or you stopped living with them in the last three months. In limited circumstances, we may consider your application after three (3) months. * You are a sponsored immigrant and your sponsor is abusing you or your children.   **Human Trafficking Criteria**   * A member of the household is being or has been trafficked   **Who Can Apply**   * You are experiencing abuse or human trafficking * You are an existing household member on the RGI Centralized Waiting List or a new applicant * You are living in RGI housing experiencing “abuse” or “human trafficking”   **How do I Apply for SPP Status?**  **If you are new to the RGI Centralized Waiting List** you must:   * Complete an RGI Application in MyAccesstoHousingTO * Sign and date the electronic Consent and Declaration form * Upload status and income related documents * Go to the Special Priority section and select "Yes" * Complete the Special Priority Application * Print, sign, date and upload the SPP application form (and any supporting documents)   **If you are already RGI eligible** you can:   * Log into your MyAccesstoHousingTO account. * Go to the Special Priority section and select "Yes" * Complete the Special Priority Application * Print, sign, date and upload the SPP application form (and any supporting documents)   If you are **currently an RGI tenant**, you must complete an online application in the MyAccesstoHousingTO system :   * Complete the SPP application and send it by mail to Access to Housing   **Notice:** If you have a safety concern about applying for SPP on your current RGI application (for example, the named abuser is a member of your current application) you can either:   * Create a new RGI application, using a new email address and password **OR** * Mail the completed Special Priority Application and supporting documentation to: **Access to Housing**, **176 Elm St, Toronto, ON M5T 3M4**.   If you require additional information about the Special Priority Program, or application forms, visit our website [www.toronto.ca/accesstohousing](http://www.toronto.ca/accesstohousing)  You must have someone verify your claim of human trafficking or abuse. Normally, this person is a professional working with you because of the human trafficking or abuse.  **The following is required to complete the Special Priority application:**   * Part A: Applicant Consent and Declaration * Part B: Declaration of Human Trafficking or Abuse * Part C: Applicant Contact Information * Part D: Proof of Joint Residency with the Abuser (not required for human trafficking) * Part E: Verification Record completed by a qualified professional * **Verification Record requirements**: A mandatory one-page Letter of Support is required from anyone **not** affiliated with a MCCSS funded Violence Against Women and/or Human Trafficking Agency in Toronto or City of Toronto Shelter Program and must be **on official letterhead, signed and dated.** |
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## **A. Applicant Consent and Declaration**

Please complete this section if you are the applicant. If you, as the applicant, are unable to sign, the consent may be signed on your behalf by a person who is authorized.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (First, Last Name - Print) hereby authorize and consent to the completion, submission and disclosure of information to the City of Toronto and have provided all of the required documents for the purposes of verifying eligibility under the Special Priority category.

* I confirm that I have obtained consent to disclosure by the abused or the trafficked member or a person authorized to consent on their behalf, if I, as the applicant, am neither of these individuals.
* I declare the information provided is correct, accurate and complete.
* I acknowledge that the information I have provided on this form will be used by the City of Toronto to determine my eligibility for Special Priority status. I consent to disclosure of my personal information by the City of Toronto to third parties for the purposes of determining my eligibility for Special Priority status.
* I understand that if any of the information I provide is determined to be inaccurate, the City of Toronto, or the housing provider may cancel my application.

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| Signature | Date (yyyy-mm-dd) |
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## **Part B: Declaration of Human Trafficking or Abuse**

**This Declaration is completed by the applicant for Special Priority status. If you are applying because of human trafficking, complete Section 1. If you are applying because you have been abused, complete Section 2.**

|  |  |
| --- | --- |
| First Name |  |
| Last Name |  |
| Application Code |  |

# Section 1: Declaration of Human Trafficking

I am being or have been trafficked by (name if available):

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| --- |
|  |

I am currently being trafficked

I stopped being trafficked on (approximate date):

|  |
| --- |
| **(yyyy-mm-dd)** |
|

|  |  |
| --- | --- |
| Signature | Date (yyyy-mm-dd) |
|  |  |

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| Section 2: Declaration of Abuse |

I have been abused by: Full Name (First, Last)

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What is the relationship with the abuser?

Intimate Partner/Spouse

Child/Parent

Other (please describe relationship):

|  |
| --- |
|  |

I am currently living with this person

I have not lived with this person since (date):

|  |
| --- |
| (**yyyy-mm-dd**) |
|

I have never lived with this person

Canadian immigration sponsor (please attach copy of a letter from Immigration, Refugees and Citizenship Canada (IRCC) confirming breakdown in sponsorship).

**Note**: If you are a sponsored immigrant and you did not live with the abuser (your sponsor), you may be eligible for Special Priority status and **may not** be required to submit proof of living together. Please make sure that the **Verification Record** **details your living arrangements.**

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| --- | --- |
| Signature | Date (yyyy-mm-dd) |
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## **Part C: Applicant Contact Information**

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| --- | --- | --- |
| **I. How would you like us to contact you? Choose one or more options to safely reach you.** | | |
| **Mail** | | |
| Street Number | Street Name | Suite/Unit Number |
|  |  |  |
| Postal Code | City/Town, Province |  |
|  |  | |
| **Telephone** | | |
| Area Code | Number | |
|  |  | |
|  | |
| **Email** | | |
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| **III. You have the option of providing a safe alternate contact in case we cannot reach you.** We will only contact your alternate contact if we cannot reach you. When contacting this person we will only ask that your contact tell you to contact Access to Housing. We will not disclose any information in your application to this person. | | | |
| Alternate contact: Full Name (First, Last) | | | |
|  | | | |
| Relationship to Applicant | | | |
|  | | | |
| Street Number | Street Name | | Suite/Unit Number |
|  |  | |  |
| Postal Code | City/Town, Province | |  |
|  |  | | |
| Telephone Number | Area Code | Number | |
|  |  | |
| Best time to call between 8:30 am to 4:30 pm (Monday to Friday) | | | |
|  | | | |

## **Part D: Proof of Joint Residency with the Abuser (Not Required for Human Trafficking)**

Special Priority status supports an individual, who **lives or lived** with an abuser and is experiencing or did experience domestic abuse and violence, to leave the abusive situation permanently.

To determine your eligibility you must provide proof that you **live or lived** with the abuser in the **last three months**.

**What is the address of the residence that you share/shared with the abuser?**

|  |  |  |
| --- | --- | --- |
| Date moved-in together (yyyy-mm-dd) | | |
|  | | |
| Street Number | Street Name | Suite/Unit Number |
|  |  |  |
| Postal Code | City/Town, Province | |
|  |  | |

**Are you currently living in a Rent-Geared-to-Income unit? Yes**  or **No** **?**

If **yes**, please provide the following:

|  |  |  |
| --- | --- | --- |
| Street Number | Street Name | Suite/Unit Number |
|  |  |  |
| Postal Code | City/Town, Province |  |
|  |  | |

I have attached proof that I am/was living with the person who abused me.

I have attached proof of sponsorship if applicable.

**If you are receiving social assistance:**

I have attached **Proof of Joint Residency with the Abuser** from my Ontario Works (OW) or Ontario Disability Support Program (ODSP) caseworker.

**If you are receiving a Rent-Geared-to-Income Housing Subsidy:**

I have attached **Proof of Joint Residency with the Abuser** from my social housing provider.

**If you are NOT receiving social assistance or living in RGI:**

I have attached **Proof of Joint Residency with the Abuser** showing that the person who abused me and I lived together within the **last three months**.

**If you are applying more than three months after separation:**

I have attached **Proof of Joint Residency with the Abuser** showing that the person who abused me and I lived together more than three months ago. You must also attach a **one** page letter that identifies the reason why you did not submit an application for Special Priority status within the three month period.

**Accepted Documentation**

Provide **Proof of Joint Residency with the Abuser** showing that you and the person who abused you lived together. Documents must be dated within the **last three months.**

You must provide at least:

* one up-to-date document with both of your names and joint address, or
* one document with your name and joint address, and one document with the abuser’s name and joint address

Visit [www.toronto.ca/accesstohousing](http://www.toronto.ca/accesstohousing) for a full list of acceptable documents

**Acceptable documents for proof of joint residency** **include:**

* up-to-date lease, rental agreement or documents, or mortgage documents
* mailed property tax or utility bills, or statement from a financial institution
* most recent mailed communication from the Canada Revenue Agency (CRA)
* benefits statement from Ontario Works (OW)/Ontario Disability Support Program (ODSP)
* educational institution registration record
* insurance policy
* police report if joint residency has been confirmed
* letter from Immigration, Refugees and Citizenship Canada (IRCC) confirming breakdown in sponsorship

**Documents that do not prove joint residency include:**

* documents/statements printed from a website
* documents/forms with self-declared unverified information (e.g. day care registration)
* health card or drug prescription receipts
* declaration from a friend or family member
* phone and internet bills

**If both your name and your abuser’s name do not appear on a document together, you may provide more than one document to show you were living at the same address at the same time.**

## **Part E. Verification Record**

**This Verification Record must be completed by someone who can confirm Part B: Declaration of Human Trafficking or Abuse.**

**Note to person completing Verification Record:**

You are being asked to complete this **Verification Record** to confirm that the applicant has been a victim of: 1) human trafficking; or 2) abuse by an intimate partner, immigration sponsor, relative or a person who is in an emotionally, physically, or financially dependent relationship with the applicant.

You are being asked only to verify the instances of abuse and are not making a recommendation for the applicant’s housing placement.

**Note**: A mandatory one-page Letter of Support is required from anyone **not** affiliated with a MCCSS funded Violence Against Women and/or Human Trafficking Agency in Toronto or City of Toronto Shelter Program with a Violence Against Women and /or Human Trafficking Agency or City of Toronto Shelter Program and must be **on official letterhead, signed and dated.** The Letter of Support must be notarized if you do not work with the applicant in a professional role, but have direct knowledge that the applicant has been subjected to human trafficking or abuse.

**Verification Record requirements**

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| --- | --- | --- | --- |
| Full Name (First, Last) of person verifying trafficking or abuse | | | Position/Title |
|  | | |  |
| Agency/Organization | | | |
|  | | | |
| Street Number | Street Name | | Suite/Unit Number |
|  |  | |  |
| Postal Code | City/Town, Province | |  |
|  |  | | |
| Business Telephone Number | Area Code | Number | |
|  |  | |

**I declare that I have reviewed the information in Part B of this application, and (please check all that apply):**

My professional assessment is the applicant is a victim of human trafficking.

My professional assessment is that the applicant has experienced one or more incidents of physical or sexual violence by the person named in Part B.

My professional assessment is that the applicant has experienced one or more incidents of abusive, controlling behavior by the person named in Part B.

My professional assessment is that the person in Part B has intentionally destroyed or injured the applicant’s property.

My professional assessment is that the words, actions or gestures of the person in Part B have threatened the applicant or made them fear for their safety.

My professional assessment is the applicant has experienced one or more incidents of financial abuse.

**Relationship to Applicant in Part B:**

I am working with the applicant around the issue of human trafficking or abuse in my professional capacity as a:

Registered Social Worker

Registered Social Service Worker

Police Officer

Registered Mental Health Therapist or Psychotherapist

Registered Nurse or Registered Practical Nurse

Registered Early Childhood Educator

Housing Provider

Lawyer

Doctor

Minister of Religion

Teacher/Guidance Counsellor

Midwife

Indigenous Leader

Indigenous Elder

Indigenous Traditional Person

Indigenous Knowledge Keeper

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| License number/professional registration number (if applicable) |
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I am not a member of one of the above professions, but I am working with the applicant in my professional role around the issue of human trafficking or abuse. **I understand that I must have this Verification Record signed by a person who has the authority to bind my agency or organization** (e.g., executive director, program manager)

I do not work with the applicant in a professional role, but I have direct knowledge that the applicant has been subjected to human trafficking or abuse. **I understand that I must have this Verification Record and my Letter of Support notarized as to the truth of the records by a commissioner for taking affidavits.**

|  |
| --- |
| **Full Name (First, Last) of person completing Verification Record** |
|  |

|  |  |
| --- | --- |
| Signature | Date (yyyy-mm-dd) |
|  |  |

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| --- | --- | --- | --- |
| **Full Name (First, Last) of person who can bind agency (**this can be the same person completing the Verification Record as per the Agency's discretion) | | | |
|  | | |  |
| Position/Title | | | |
|  | | |  |
| Signature | | | Date (yyyy-mm-dd) |
|  | | |  |
| Agency Name | | | |
|  | | | |
| Street Number | Street Name | | Suite/Unit Number |
|  |  |  |  |
| Postal Code | City/Town, Province | |  |
|  |  | | |
| Business Telephone Number | Area Code | Number | |
|  |  | |

Housing Secretariat collects personal information on this form under the legal authority of the Housing Services Act, 2011, section 48(2)1 and Ontario Regulation 367/11, General, section 53. Questions about this collection can be directed to Project Manager, Access to Housing (Housing Connections), 176 Elm Street, Toronto, Ontario, M5T 3M4 or by telephone at 416-338-8888.