

RECEIVED: _____ MEMBERSHIPS: _____ PLACEMENTS ATTENDED: _____ - _____ - _____

SANFORD

housing co-operative

Please return to: The Office, 11 Sanford Walk, New Cross,
LONDON SE14 6NB

Tel: 0208 692 7316 Mob: 07922501385

Applications and enquiries: membership@sanford.coop

DATA PROTECTION STATEMENT

This information will be used by Sanford to determine eligibility and suitability for membership and for monitoring the membership process. Next of kin data may be used in the event of an emergency.

1. PERSONAL DETAILS

YOU

Title:

Name:

Address:

.....

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Postcode:

Telephone:

Email:

(We prefer to contact you by phone, text or email to keep our costs and your waiting time down.)

NEXT OF KIN

(If you have no next of kin, please give details of another person you would like us to contact in the event of an emergency.)

Name:

Address:

.....

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Postcode:

Telephone:

Email:

Relationship to you:

1. Have you lived at Sanford before?

(If yes, please let us know when.)

2. Do you know anyone living at Sanford? *(If you are invited for interview you will be asked the names of people you know to ensure an impartial interview panel)* Yes No

2. LIVING IN A CO-OPERATIVE COMMUNITY

1. Have you any experience of co-operative, collective or community organisation? (If so, please give brief details of the type of community or group)

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2. Please explain as fully as possible your understanding of a housing co-operative. (it may be helpful to refer to the information sent with this form or available on our website)

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3. Why would you like to live in a housing co-operative (rather than other types of accommodation)?

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4. Members are expected to take part in the day-to-day and long-term work involved in keeping the Co-op running. We encourage members to contribute in areas of work that fit their particular skills or preferences. Please tick any of the tasks below that you feel would suit you:

PRACTICAL

- Managing and maintaining the car park.
- Keys, locks, and security.
- General building maintenance.
- Gardening and related tasks.
- Checking the condition of rooms and furniture.
- Health and Safety.
- Reducing our environmental impact.
- Maintaining the wood-fired heating system.
- Maintaining the ponds and caring for the fish.
- Managing and maintaining the bike shed.

ADMINISTRATIVE

- Recruiting and interviewing new members.
- Finance and bookkeeping.
- Producing and distributing notices and information.
- Computer skills.
- Publicity and advertising.
- Liaising with, and advising members with rent arrears.
- Equal opportunities.
- Mediating in disputes.
- Arranging meetings and taking minutes.
- Chairing and managing meetings.
- Facilitating and organising training.

Of those you have ticked, which are your preferences? (Relevant experience is useful but not essential.)

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2. LIVING IN A CO-OPERATIVE COMMUNITY (CONTINUED)

5. What skills, experience and personal qualities do you have that might be useful or helpful in a co-operative community?

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6. Have you ever lived in shared accommodation before (or accommodation that shared facilities)? *(If so, please give brief details)*

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7. Do you believe there are any attitudes, behaviours or qualities that make a person unsuitable to live in a community of shared housing? *(If so, please give some examples.)*

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8. How would you expect a problem to be dealt with in a shared house?

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9. How would you deal with a personal disagreement or a problem with another member?

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10. Do you believe there are any: -

Advantages or positive aspects to shared accommodation? *(If so, what are they?)*

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Disadvantages or negative aspects to shared accommodation? *(If so, what are they?)*

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3. ABOUT YOUR CURRENT HOUSING

1. What is your current housing?

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2. Do you own or let/sublet a property to others?

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3. How long do you hope to live at Sanford?

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4. ABOUT YOU

What is your First Language?

(If English is not your first language, we may be able to provide an interpreter for you at any interviews. Alternatively, you may bring your own interpreter if you wish.)

1. Please use this space to tell us a bit about yourself

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2. What are your future plans?

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5. FINANCIAL

1. How do you intend to fund rent payments?

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2. Do you have a UK National Insurance Number (Please answer "Yes" or "No")?:

(If "No", you may need to show that you have a guaranteed income.)

3. Would you be willing to set up a Standing Order or Direct Debit to pay your rent, or have Housing Benefit paid directly to the Co-operative? (If not, please let us know your reasons.)

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4. Have you ever had to leave previous accommodation because you had difficulties paying the rent? (If so, please give details.)

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6. REFERENCES

1. Please give details for two people that can give you a reference. If possible, we would prefer one of the referees to be a current or past employer, landlord, or other non-personal referee.

Name:

Address:

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Postcode:

Telephone:

Email:

Relationship to you:

Name:

Address:

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.....

Postcode:

Telephone:

Email:

Relationship to you:

7. MONITORING AND FEEDBACK

Please take a few moments to answer the following questions to help us improve our application procedure.

1. How did you hear about Sanford?

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2. Did anyone help you filling in this form? (If yes, please let us know what you needed help with - if you are having difficulty filling out the form please call our office and leave contact details for a Membership Officer to get in touch with you)

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3. Please let us know if you had any problems or questions when completing your application. (For instance: Did you consider any of the questions to be unclear, unnecessary or inappropriate etc.?)

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8. DECLARATION

PLEASE SIGN AND DATE THE DECLARATION BELOW:

I hereby declare that to the best of my knowledge the information provided in this application is true and accurate. I agree that the officers of Sanford Housing Co-operative may approach my referees for references.

I confirm that:

I am aged 18 or over at the time of this application.

I am not a primary carer for children

I do not intend to share a room

I intend for Sanford to be my sole residence

I am not receiving income from a property

I am not a former member who has either been evicted or left owing rent arrears

I do not own a dog

I confirm that I have read and accept the Data Protection Statement on the front of the form.

I understand that should any information be found to be incorrect or falsified in any way, that my application or any successful subsequent tenancy will be terminated.

Signed: Date:

OFFICE USE ONLY

OFFICE USE ONLY				

MEMBERSHIP PANEL:

SELECTED

Panel member signatures:

NOT SELECTED

- 1:
- 2:
- 3:
- 4:
- 5:

If the applicant has been rejected or recommended for re-interview, please give your reasons below:

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