**Transitional Shelter (Individual) Social Report Template**

Email to : [transitionalshelter@allkin.org.sg](mailto:transitionalshelter@allkin.org.sg)

* Referral Agency Case Ref (where relevant)\*: type here
* Referring worker (name/designation): type here
* Name of main applicant: type here

MSF referral form filled up (Compulsory) – retrieve from [MSF-Form](https://cdn.sanity.io/files/ujrdx6te/production/80d24ff0f9b724d06359372bdbaa3610fce574f7.docx)

1. **Applicant Background - illustrates through Genogram and Ecomap\***

(*Describe the relationship and interaction between the applicant with his/her family members. Do also include the involvement of systems and its impacts).*

Checklist for diagrams\*\*

Genogram Ecomap

*A white square with a blue border

Description automatically generated*

Describe diagram where needed here.

1. **Current/previous assistance received by and social support of applicant**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of agency | Assistance amount | Period of assistance | Name of POC | Email of POC | Contact of POC |
| e.g., SSO | $400 | Jun to Dec | Mr A | [sso@msf.gov.sg](mailto:sso@msf.gov.sg) | 6789 1234 |
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1. **Housing matters*:*** 
   1. ***Home ownership and housing history*** *- illustrates through Timeline\**

Please fill in the information as much as possible so that we can facilitate the application.

* 1. ***Current housing situation and attempted solutions*** *(Describe applicant’s current’s residence at the point of application. Do also include applicant’s efforts and attempts to resolve housing issue. For instance, approaching informal systems or utilizing resources (e.g., savings).*

This is the applicant history, future plans please list below.

* 1. ***Housing plans*** *(Describe applicant’s long term housing plan (LTHP). For instance, applicant is looking to rent a flat from HDB under the Joint Singles Scheme (JSS).* *To also include point of contact of HDB officer, email & contact number)*

Click or tap here to enter text.

**\*For applicant planning to apply for HDB flat (Rental or Purchase)** Choose an item. **\*must choose 1**

A**pplied to HDB before but rejected:** when? type here **Applied to HDB on** when? type here **but no outcome.  
 Applied to HDB on** when? type here **awaiting allocation. : Pls attached documentation from HDB.**

Describe your selection further.

1. **Needs of applicant**

|  |  |  |
| --- | --- | --- |
| **What are we worried about?**  *(Please share on the specific area of needs and its impact on applicant)* | **What’s Working Well?** | **What needs to happen?** |
|  |  |  |
| Describe how would the shelter alleviate applicant’s situation: | | |

1. **Risk and safety concerns of applicant**

*(Describe the type, onset, causal factors, frequency, and severity, etc)*

Click or tap here to enter text.

1. **Applicant’s physiological, socioemotional, and mental functioning**

*(Describe applicant’s disposition, ability to be independent and be in a communal setting. Do include past and current physical and mental health diagnosis)*

**IF THERE ARE KEY AREAS OF NEEDS/CONCERNS, please tick accordingly.**

1. Mobility   
   e.g walking aid, wheelchair, electric PMD.
2. Caring for personal hygiene and basic needs  
   e.g can maintain personal hygiene and grooming.
3. Behavioural  
   e.g staying and interacting with other.
4. Psychiatric / Medical  
   e.g info on past and present condition, medication management.
5. Social and Emotional  
   e.g describe of any present support or lack of support.
6. Cognitive  
   e.g describe of any memory or processing impairment.
7. **Employment**

*(Include current employment, history of employment, income drawn and period of employment)*

Choose an item. *\**If not working now.

Describe more and remember to attach supporting document in referral.

1. **Financial situation - illustrates through an Income & Expenditure (I&E) table:**

*(Include* *arrears, hire purchase and other loans if any)*

Click or tap here to enter text.

*You can copy and paste your table below for I&E*

1. **Breakdown of cash proceeds from sales of flat**

*Illustrate in table format. Provide letter of undertaking if unable to furnish information.*

|  |  |  |
| --- | --- | --- |
| **Cash Proceeds** | **Distribution Party** | **Amount Distributed** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. **Any other information helpful for assessment of suitable for admission to shelter?**

Click or tap here to enter text.

Referral by: Click or tap here to enter text.

Designation: Click or tap here to enter text.

Date: Click or tap here to enter text.

Contact/Email: Click or tap here to enter text.

Support by: *(where necessary):* Click or tap here to enter text.