

**HOUSING OPPORTUNITIES FOR WOMEN, INC.**  
**Permanent Supportive Housing Programs**

	<b>Singles Two</b>	<b>Family Two</b>	<b>Shelter Plus Care &amp; Chicago Low-Income Housing Trust Fund</b>	<b>HOPWA</b>	<b>Chronic Homeless Initiative</b>
<b>Eligibility</b>	homeless <u>and</u> working (stable documented employment)	homeless <u>and</u> working (stable documented employment)	homeless <u>and</u> disabled (HUD per defined disabilities)	homeless or imminently homeless <u>and</u> impacted with HIV/AIDS related illnesses	chronically homeless* <u>and</u> disabled (per HUD defined disabilities)
<b>Age</b>	At least 18	At least 18	At least 18	At least 18	At least 18
<b>Family Unit</b>	Single Women	Women with Children	Single Women or w/kids	Single Women or w/kids	Single Women
<b>Disability</b>	none required	none required	Substance abuse, mental illness, complex medical (i.e. HIV/AIDS related illness)	HIV/AIDS related illness.	Substance abuse, mental illness, complex medical (i.e. HIV/AIDS related illness)
<b>Disability Criteria</b>	disability not required, but if one is present then compliance minimums apply	disability not required, but if one is present then compliance minimums apply	3 months sober, 3 months stable, and 3 months treatment compliant.	3 months sober, 3 months stable, and 3 months treatment compliant.	3 months sober, 3 months stable, and 3 months treatment compliant.
<b>Criminal Convictions</b>	6 months from date of release for nonviolent crimes	6 months from date of release for nonviolent crimes	6 months from date of release for nonviolent crimes	6 months from date of release for nonviolent crimes	6 months from date of release for nonviolent crimes
<b>Required income</b>	Minimum of \$10,000 annual income	Based on family size	At or below 50% of median income	At or below 50% of median income	At or below 30% of median income
<b>Program Duration</b>	2 years	2 years	undefined	undefined	undefined
<b>Complete application submission to HOW</b>	1. application form 2. letter of homelessness 3. employment documentation	1. application form 2. letter of homelessness 3. employment documentation	1. application form 2. letter of homelessness 3. letter of disability	1. application form 2. letter of homelessness 3. letter of disability	1. application form 2. letter of homelessness 3. letter of disability

- \* Chronically homeless: continually homeless for at least one year or have had at least 4 episodes of homelessness within the past three years.
- \* Homelessness status falls under the criteria defined by HUD.
- \* If applicant has been in recovery for more than 2 years, substance abuse is no longer considered a disability
- \* Individuals currently receiving methadone treatment are not eligible.