



## Expression of Interest: Transitional Housing for Addiction Recovery Program

### Applicant Information

Organization Name

Primary Contact: *(include position within organization)*

Phone Number

E-mail

Mailing Address

### Applicant Detail

Description of your organization and mandate *(include communities you provide services and programs to):*

If applicable, please provide a description of your organization's experience with Mental Wellness and Addiction Recovery Programming *i.e. have you been involved with programming or services within your region or community that provides mental health or addiction recovery programming.*

## **Proposed Program Detail:**

Summarize your vision for a Transitional Housing for Addiction Recovery program. Please incorporate a description of the following elements. *e.g. What the program service delivery model would be, what services and supports will be delivered, social and cultural considerations.*

Identify potential partners you would work with to deliver the Transitional Housing for Addiction Recovery Program (e.g. community supports, territorial supports)

Please detail your organizational programming capacity to facilitate a Transitional Housing for Addiction Recovery Program:

## **Infrastructure Detail:**

Summarize your vision for a Transitional Housing for Addiction Recovery program. Please incorporate a description of the following elements. *e.g. What the program service delivery model would be, what services and supports will be delivered, social and cultural considerations.*

The location/address of the proposed site, *if applicable*:

The zoning of the site, *if applicable*:

The environmental status of the land (*include a copy of a phase 1 environmental assessment, if completed and applicable*):

Can your organization move ahead to the building stage or provision of units quickly?  Yes  No

*Please provide detail:*

**The response to this Expression of Interest must be submitted via e-mail no later than 5:00 PM on Friday, December 17th, 2021.**

**Please title applications “Expression of Interest: Transitional Housing for Addiction Recovery Program” and send to [mha@gov.nt.ca](mailto:mha@gov.nt.ca).**