



Tulalip Tribes Community Housing Needs Survey

We appreciate you taking time to respond to the survey to help us better understand the housing needs of our Tribal Community. The following survey questions will take approximately 5 minutes to complete.

1. Including yourself, how many people live in your household? ____
2. Including yourself, what are the ages of the members in your household? Please indicate the number of family members in each age category applicable.

(example: 3 : 0-12 if you have three children ages 0-12).

____: 0-12 ____: 13-18 ____: 19-30 ____: 31-40
____: 41-50 ____: 51-54 ____: 55 and older

3. What is your current employment status?

____ Full-time Employed ____ Part-time Employed ____ Self Employed
____ Retired ____ On Disability
____ Student: ____ Working ____ Not working
____ Unemployed: ____ less than 6 months ____ more than 6 months

4. Are you a Veteran?

____ Yes ____ No

5. Do you currently live in a home managed by either of the following?

____ Tulalip Housing Department ____ Tulalip Leasing Department
____ None of the Above

6. What is your annual gross income?

____ Less than \$10,000 ____ \$10,000 - \$14,999 ____ \$15,000 - \$24,999
____ \$25,000 - \$34,999 ____ \$35,000 - \$49,999 ____ \$50,000 - \$74,999
____ \$75,000 or more

7. What is your current living situation?

- | | |
|--|---|
| <input type="checkbox"/> House | <input type="checkbox"/> Mobile Home |
| <input type="checkbox"/> Apartment | <input type="checkbox"/> Hotel/Motel |
| <input type="checkbox"/> Living w/Family, Friends | <input type="checkbox"/> Homeless |
| <input type="checkbox"/> Assisted Living | <input type="checkbox"/> Group Home |
| <input type="checkbox"/> Nursing/Long-term Care Facility | <input type="checkbox"/> Transitional/Temporary Housing |
| <input type="checkbox"/> Other (please specify): _____ | |

8. What is your total monthly payment for rent and utilities? (i.e., Rent + electric, gas, water, sewer, trash, internet, phone, etc.). For example, you have rent of \$850 + utilities of \$260 = Total monthly payment of \$1,110.

- | | | |
|--|--|--|
| <input type="checkbox"/> \$1 - \$200 | <input type="checkbox"/> \$201 - \$400 | <input type="checkbox"/> \$401 - \$600 |
| <input type="checkbox"/> \$601 - \$800 | <input type="checkbox"/> \$801 - \$1,000 | <input type="checkbox"/> \$1,001 - \$2,000 |
| <input type="checkbox"/> \$2,001 - \$4,000 | <input type="checkbox"/> \$4,001 - \$6,000 | <input type="checkbox"/> Over \$6,000 |

9. What type of housing do you and/or your family need most or wish to upgrade to?

- | | |
|--|--|
| <input type="checkbox"/> Single-Family Detached | <input type="checkbox"/> Townhouse Style |
| <input type="checkbox"/> Apartment Complex | <input type="checkbox"/> Elder Housing |
| <input type="checkbox"/> Transitional Housing | <input type="checkbox"/> Homeless Shelter |
| <input type="checkbox"/> Student Housing | <input type="checkbox"/> Rehabilitated Homes |
| <input type="checkbox"/> Tiny Homes | <input type="checkbox"/> None of the Above |
| <input type="checkbox"/> Other (please specify): _____ | |

10. Do you currently live on the Tulalip reservation?

- ☐ Yes ☐ No

11. Would you want to live on or off-reservation?

- ☐ On-Reservation ☐ Off-Reservation

12. In the past 12 months, have you experienced any of the following instances of homelessness? Please check all that apply.

- ☐ Living in a place not meant for human habitation, emergency shelter, transitional housing, or are exiting an institution where temporarily resided.
- ☐ Lack a fixed, regular, and primary nighttime residence, which may include those staying at a motel or hotel.
- ☐ Staying with friends or family but are unable to legally stay there for longer than 14 days.
- ☐ Family with children or unaccompanied youth who have been unstably housed during the preceding 60 days and likely to continue in that state for an extended period of time.
- ☐ Fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening situations related to violence; have no other residence, and lack the resources or support networks to obtain other permanent housing.
- ☐ None of the above

13. What do you think is the biggest challenge you have in finding stable housing? Please check all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Financial and Credit Issues | <input type="checkbox"/> Legal/criminal/correctional history |
| <input type="checkbox"/> Under income requirements | <input type="checkbox"/> Over income requirements |
| <input type="checkbox"/> Lack of available single-family homes | <input type="checkbox"/> Lack of apartment/complex housing |
| <input type="checkbox"/> Alcohol/substance use disorders | <input type="checkbox"/> Physical disability |
| <input type="checkbox"/> Mental and behavioral health illness/disability | <input type="checkbox"/> Other (please specify): _____ |
| <input type="checkbox"/> None of the above | |

14. What size home will reasonably accommodate your current housing need?

- | | |
|--|---|
| <input type="checkbox"/> 2 bedroom/1 bath | <input type="checkbox"/> 2 bedroom/2 bath |
| <input type="checkbox"/> 3 bedroom/2 bath | <input type="checkbox"/> 3 bedroom/2.5 bath |
| <input type="checkbox"/> 4 bedroom/2 bath | <input type="checkbox"/> 4 bedroom/2.5 bath |
| <input type="checkbox"/> 5 bedroom/3 bath | <input type="checkbox"/> None of the above |
| <input type="checkbox"/> Other (please specify): _____ | |

15. From the following list, how interested are you in the following topics for classes or workshops?

	Not Interested	Somewhat Interested	Very Interested
Financial Management/Budgeting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Simple Home Improvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preparing for Homeownership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rental Housing Guidance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Sovereignty/Gardening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fitness/Meditation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arts & Crafts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16. Of responses received for community needs, please rate the importance of the following community needs?

	Not Important	Somewhat Important	Very Important
Safety and Security Patrol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Street Lighting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enforcement of Cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speed Reduction Measures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Park & Playground	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Landscaping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Are there any suggestions or other information you would like to share regarding Tulalip Housing?