

# Accommodation Application Form

## Application Process

### 1 Completing Your Application

- All applicants complete **SECTION 1** and **SECTION 4 (Red)**
- Apartment applicants complete **SECTION 2 (Blue)**
- Lodge applicants complete **SECTION 3 (Orange)**

Applicants are only able to apply for **one** housing program.



**Apartment** - Accommodation with a kitchen

- **Subsidized** (*Rent 30% of gross monthly income, income criteria required*)
- **Affordable** (*Sakaw Terrace Subsidized Affordable, Rosslyn Terrace and Ottewell Terrace -income criteria required. Sakaw Terrace Affordable - income criteria not required*)
- **Duplex** (*Flat rate, does not vary with income, income criteria required*)



**Lodge** - Includes support services for meals, housekeeping, and recreation services

- **Subsidized** (*Rent 30% of gross monthly income plus support services fee, income criteria required*)

### 2 Submitting Your Application

After you have completed the information, you can submit your application in one of the following ways:

- Complete the fillable PDF (using Adobe Reader or Adobe Acrobat) and submit using the 'send' button located on page four. You must have an email account to do this.
- Download and complete the fillable PDF (using Adobe Reader or Adobe Acrobat) and mail or drop off in person at GEF Seniors Housing, Central Services, 14220 109 Avenue
- Complete, print, scan and email it to [housing@gef.org](mailto:housing@gef.org)
- Mail it to GEF Seniors Housing, Central Services, 14220 109 Avenue, Edmonton, AB, T5N 4B3

Please call GEF Seniors Housing, Central Services at 780-482-6561 if you have any questions.

### 3 Confirming Your Application

After submitting your application, you will be contacted with the next steps.



# SECTION 1:

## ALL APPLICANTS COMPLETE RED SECTION

Personal Information	First Applicant	Second Applicant (if applicable)
<b>Legal Name</b>	First	First
	Last	Last
<b>Preferred Name</b> <i>If applicable</i>		
<b>Gender</b>		
<b>Date of Birth</b>	____ / ____ / ____ Month / Day / Year Must be at least 65 years old ( <i>First applicant</i> )	____ / ____ / ____ Month / Day / Year Must be at least 60 years old ( <i>Second applicant</i> )
<b>Citizenship Status</b>	Canadian Citizen: <input type="radio"/> Yes <input type="radio"/> No Permanent Resident: <input type="radio"/> Yes <input type="radio"/> No Privately Sponsored: <input type="radio"/> Yes <input type="radio"/> No Other _____	Canadian Citizen: <input type="radio"/> Yes <input type="radio"/> No Permanent Resident: <input type="radio"/> Yes <input type="radio"/> No Privately Sponsored: <input type="radio"/> Yes <input type="radio"/> No Other _____
<b>Marital Status</b>	<input type="radio"/> Single <input type="radio"/> Divorced <input type="radio"/> Common Law <input type="radio"/> Married <input type="radio"/> Widowed <input type="radio"/> Separated	
<b>Mailing Address</b>		
<b>Home/Mobile Number</b>		
<b>Email</b>		
<b>Language Spoken</b>	What language? _____ Interpreter required? <input type="radio"/> Yes <input type="radio"/> No	What language? _____ Interpreter required? <input type="radio"/> Yes <input type="radio"/> No
<b>Have you ever lived in a GEF building before?</b>	<input type="radio"/> Yes <input type="radio"/> No If yes, indicate year and building: _____	<input type="radio"/> Yes <input type="radio"/> No If yes, indicate year and building: _____
<b>Do you smoke?</b>	<input type="radio"/> Yes <input type="radio"/> No ( <i>This will not affect eligibility</i> )	<input type="radio"/> Yes <input type="radio"/> No ( <i>This will not affect eligibility</i> )
<b>Parking</b>		
Do you require parking? <input type="radio"/> Yes <input type="radio"/> No   ( <i>There are wait lists for parking at some buildings.</i> )		
<b>Alternate Contact Person</b>		
Name	Phone Number	
Relationship	Cell Number	

## Current Accommodation

Home Owner       Renter       Other: \_\_\_\_\_

How long have you lived here? \_\_\_\_\_

Have you received a Notice to Vacate?       Yes       No      *If yes, please include a copy of Notice to Vacate.*

<b>Current Landlord</b>	Name	Phone Number
	Property Management Company	

<b>Previous Landlord</b> <i>If you have rented at current rental for less than 2 years, please complete this section.</i>	Name	Phone Number
	Property Management Company	How long did you live here?

**What are your current monthly payments?**  
Rent/Mortgage \$ \_\_\_\_\_ Power \$ \_\_\_\_\_ Heat \$ \_\_\_\_\_ Water \$ \_\_\_\_\_  
Other \$ \_\_\_\_\_

Financial Information	First Applicant	Second Applicant <i>(if applicable)</i>
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### THIS INFORMATION IS MANDATORY FOR SUBSIDIZED, DUPLEX, AND AFFORDABLE HOUSING

<b>Line 150</b> from the most current income tax year from the Notice of Assessment.	\$ _____ Year: 20 _____	\$ _____ Year: 20 _____
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### Please check the boxes that reflect the sources of your income

Old Age Security (OAS)	<input type="radio"/>	<input type="radio"/>
Canada Pension Plan (CPP)	<input type="radio"/>	<input type="radio"/>
Guaranteed Income Supplement (GIS)	<input type="radio"/>	<input type="radio"/>
Alberta Seniors Benefit (ASB)	<input type="radio"/>	<input type="radio"/>
Assured Income for the Severely Handicapped (AISH)	<input type="radio"/>	<input type="radio"/>
Employment Income	<input type="radio"/>	<input type="radio"/>
Foreign Pensions	<input type="radio"/>	<input type="radio"/>

Other (e.g. Other pensions etc.) \_\_\_\_\_

## Housing Program (Select only ONE)

**Subsidized** (*Rent 30% of gross monthly income, income criteria required*)

**Affordable** (*Income criteria required*)

**Lodge** (*Rent 30% of gross monthly income plus support services fee, includes meals and housekeeping*)

**Duplex** (*Flat rate, does not vary with income, income criteria required*)

<b>Apartment</b>	<input type="radio"/> Subsidized <input type="radio"/> Affordable <input type="radio"/> Duplex	<b>GO TO SECTION 2 (Blue)</b> <b>IF YOU SELECT APARTMENT</b>
<b>Lodge</b>	<input type="radio"/> Subsidized	<b>GO TO SECTION 3 (Orange)</b> <b>IF YOU SELECT LODGE</b>

## SECTION 2: APARTMENT APPLICANTS COMPLETE BLUE SECTION

### Apartment Accommodation

Bachelor    One Bedroom    Two Bedroom

Do you require wheelchair accessibility?  Yes  No

Desired move-in date: Month \_\_\_\_\_ Year \_\_\_\_\_

Preferred Building Name  
\_\_\_\_\_

Other Building  
\_\_\_\_\_

**AVOID PROCESSING DELAYS!** Please ensure you indicate the NAME of your preferred building. For a list of buildings, refer to Housing Brochure or **visit [gef.org](http://gef.org)**

## SECTION 3: LODGE APPLICANTS COMPLETE ORANGE SECTION

### Lodge Accommodation

Single Room    Double Room

Do you require wheelchair accessibility?  Yes  No

Desired move-in date: Month \_\_\_\_\_ Year \_\_\_\_\_

Preferred Building Name  
\_\_\_\_\_

Other Building  
\_\_\_\_\_

**AVOID PROCESSING DELAYS!** Please ensure you indicate the NAME of your preferred building. For a list of buildings, refer to Housing Brochure or **visit [gef.org](http://gef.org)**

## SECTION 4: ALL APPLICANTS COMPLETE RED SECTION

### Other Information You Want To Provide

Where did you hear about GEF Senior Housing? \_\_\_\_\_

For more information please visit **[gef.org](http://gef.org)** or call **780-482-6561**.

\_\_\_\_\_  
First Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Second Applicant's Signature  
(if applicable)

\_\_\_\_\_  
Date

This confidential information is being collected under the authority of the Alberta Housing Act and will be used to determine eligibility of applicants, need and allocation within the housing programs at GEF Seniors Housing. Collected personal information is protected from unauthorized access, collection, use and disclosure in accordance with Alberta privacy legislation and can be reviewed or corrected upon request. Questions regarding the collection of personal information can be directed to the FOIP Coordinator at GEF Seniors Housing by phone at 780-482-6561, by fax at 780-488-3561, or by email at [housing@gef.org](mailto:housing@gef.org)



### OFFICE USE ONLY

**GEF Applicant Code**

**Apartment**    Subsidized    Affordable    Duplex

**Lodge**    Subsidized    Affordable

**Date Entered into Database**

**Initial Follow-Up Date (e.g. phone call)**

**Interview Date**

Application Received Date Stamp