

Accommodation Application Form

Application Process

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Completing Your Application

- **First, download the application and save the PDF to your computer**
- 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 - Self-contained apartment with a kitchen and private bathroom

- **Subsidized** (*Rent 30% of gross monthly income, income criteria required*)
- **Affordable** (*Sakaw Terrace, Rosslyn Terrace and Ottewell Terrace - Rent is a fixed rate. Income verification is required at the time of application*)



Lodge - Self-contained unit with private bathroom. Includes support services for meals, housekeeping, and recreation services

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

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Submitting Your Application

After you have downloaded and filled in the form, you can submit your application in one of the following ways:

- Save, attach and email to housing@gef.org **OR**
- Save, print, mail or drop off at GEF Seniors Housing, Central Services, 14220 109 Avenue, Edmonton, AB T5N 4B3 **OR**
- Print, scan and email it to housing@gef.org

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Confirming Your Application

You have successfully submitted your application for housing. Your application will be processed, and we will contact you within ten business days to schedule your housing interview. *Please note that housing is not automatically guaranteed by submitting an application.

If you have any questions about your application, please call 780-482-6561 during regular business hours, or email us at housing@gef.org.



SECTION 1:

ALL APPLICANTS COMPLETE RED SECTION

Personal Information	First Applicant	Second Applicant (if applicable)
Legal Name	First	First
	Last	Last
Preferred Name <i>If applicable</i>		
Gender		
Date of Birth	____ / ____ / ____ 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>)
Citizenship Status	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 _____
Marital Status	<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	
Mailing Address		
Home/Mobile Number		
Email		
Language Spoken	What language? _____ Interpreter required? <input type="radio"/> Yes <input type="radio"/> No	What language? _____ Interpreter required? <input type="radio"/> Yes <input type="radio"/> No
Have you ever lived in a GEF building before?	<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 _____
Do you smoke?	<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>)
Do you have a pet? (<i>Refer to the Pet Policy Q and A brochure for more information</i>)	<input type="radio"/> Yes <input type="radio"/> No <i>If yes, what kind of pet do you have?</i> _____	
Parking		
Do you require parking? <input type="radio"/> Yes <input type="radio"/> No (<i>There are wait lists for parking at some buildings.</i>)		
Alternate Contact Person		
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.*

Current Landlord	Name	Phone Number
	Property Management Company	

Previous Landlord <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 AND AFFORDABLE HOUSING

Line 15000 (Total Income) 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*)

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

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**

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**

SECTION 4: ALL APPLICANTS COMPLETE RED SECTION

Other Information You Want To Provide

Where did you hear about GEF Seniors Housing?

For more information please visit **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



07.05.22

OFFICE USE ONLY

GEF Applicant Code

Apartment Subsidized Affordable

Lodge Subsidized Affordable

Date Entered into Database

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

Interview Date

Application Received Date Stamp