

Application #: \_\_\_\_\_

## PLEASE READ CAREFULLY BEFORE FILLING OUT APPLICATION

### QUALIFICATIONS

- ∞ Must provide proof of income to confirm eligibility to Income Thresholds (if applicable).

### PROCEDURE

**Both the Applicant and Co-Applicant must sign and date the document.**

#### Required documents that **MUST BE** submitted with your application:

- Proof of Indigenous Ancestry – Métis Card, Status Card or Inuit Status, if applicable.
- Current Government Identification i.e., Driver's License.
- Alberta Health Care – All family members.
- Medical Letter – If you or someone in your family has a disability or requires a barrier free unit.
- Proof of Current Income, pay stub, client reporting card or EI Statement, and a current bank statement 30 to 60 days with your name on it.
- Legal Documents for Child Support/Guardianship, if applicable.

**NOTE: Further documentation will be required when the next suitable unit is assigned to you to confirm Eligibility, including updated income.**

- ∞ **Previous years Tax Assessment.**
- ∞ **Previous years Child Tax Benefit Notice.**
- ∞ **Current income verification.**
- ∞ **Personal Information Check and or a Criminal Record Check - for all applicants 18 – 64 years may be requested.**

#### **PLEASE NOTE: WE ARE NOT AN EMERGENCY HOUSING PROGRAM**

All applications are processed at head office in Edmonton. Once ALL required documents are submitted with the application, it is then reviewed for eligibility. The applicant will be sent a letter advising if further information is required, application is approved (or denied) to the wait list.

When approved to the wait list, the applicant is then asked to confirm continued interest every three months. ***It is imperative the applicant advise our office of any change in contact information as soon as it changes. If we do not have the most current contact information on file, you could be missed for the next available unit.***

Tenancy follows the National Housing Occupancy Standards which take into account family size.

**WHICH HOUSING PROGRAM ARE YOU APPLYING FOR?**

- Renaissance Tower                       Service Canada (Medicine Hat)                       Market  
 Voyageur Manor                               Affordable     Subsidized

**WHICH TOWN OR CITY ARE YOU APPLYING FOR?**

- Bonnyville                                       Calgary\*\*     Cold Lake  
 Edmonton\*\*                                       Fort McMurray     Grande Prairie\*\*  
 Lac La Biche                                       Lloydminster     Medicine Hat\*\*  
 Peace River\*\*                                       Red Deer     Rocky Mountain House  
 Slave Lake     St. Paul

*(\*\*The following cities have affordable housing: Edmonton, Calgary, Grande Prairie, Medicine Hat and Peace River)*

**ALL INFORMATION MUST BE COMPLETED BEFORE PLACEMENT ON WAIT LIST**

Applicant Name:	Co-Applicant Name:
Applicant's Date of Birth:	Co-Applicant's Date of Birth:
Social Insurance Number:	Social Insurance Number:
Alberta Health Care Number:	Alberta Health Care Number:
<input type="checkbox"/> Métis <input type="checkbox"/> First Nation <input type="checkbox"/> Inuit <input type="checkbox"/> Other	<input type="checkbox"/> Métis <input type="checkbox"/> First Nation <input type="checkbox"/> Inuit <input type="checkbox"/> Other
Address:	Address:
City/Province:                              Postal code:	City/Province:                              Postal code:
Current Telephone Number:	Current Telephone Number:
Email Address:	Preferred method of communication <input type="checkbox"/> Text <input type="checkbox"/> Phone <input type="checkbox"/> Email
Do you give Métis Housing consent to send correspondence via email? <input type="checkbox"/> Yes <input type="checkbox"/> No	

**Applicant's Marital Status:**  Married     Single     Common-Law     Other

**LIST ALL OTHER PEOPLE WHO WILL BE LIVING WITH YOU** (WRITE ON THE BACK OR ADD EXTRA SHEET IF NECESSARY):

NAME	GENDER	RELATIONSHIP	BIRTH DATE	ALBERTA HEALTH CARE NUMBER	ANCESTRY (MÉTIS, FIRST NATION OR INUIT)
			MM/DD/YY		
			MM/DD/YY		
			MM/DD/YY		
			MM/DD/YY		
			MM/DD/YY		
			MM/DD/YY		

Is baby expected?  Yes  No                                      If yes, when?

**SOURCE OF APPLICANTS INCOME:**                                      **SOURCE OF CO-APPLICANTS INCOME:**

Employed gross monthly amount: \$	Employed gross monthly amount: \$
Employer's phone:	Employer's phone:
Alberta Income Supports total/month: \$	
Workers name:	Workers phone:
Canada Child Benefit total/month: \$	Child Support: \$
AISH: \$	Pension(s): \$
EI: \$	Student Grant(s): \$
Other: \$	

**INCLUDE INCOME FOR ALL DEPENDENT'S RESIDING WITH YOU IN ABOVE SPACE PROVIDED**

**ALL INFORMATION MUST BE COMPLETED BEFORE PLACEMENT ON WAIT LIST**

**CURRENT ADDRESS:** If you currently reside in housing located either on a First Nation Reserve or a Métis Settlement, you will need to provide written documentation from the reserve or settlement office stating whether or not you or your immediate family have a home on their lands.

Do you own your own home?  Yes  No

I currently live in:  Apartment  House  Condo  Basement Suite  No Fixed Address

When does your current lease expire?

Length of time at present address: Years      Months      Monthly Rent \$

Are Utilities Included?:  Yes  No      Monthly cost of: Power:      Gas:      Water:

Current number of Bedrooms:      How much notice must you give before moving?

Current Landlord:

Telephone:      Address:

Previous Landlord:      Move out date:

Telephone:      Address:

**Do you require "Barrier Free" accommodations?** (specifically for those with wheelchairs)  Yes  No

**Do you require "Barrier Free Adaptable" accommodations?** (for disability or mobility issues)  Yes  No

**OTHER INFORMATION:**

Have you ever applied to Métis Urban or Métis Capital Housing before?  Yes  No      If yes, when?

**CALGARY APPLICANTS ONLY** - Check area of preference:  NE  NW  SE  SW

**NEXT OF KIN / CONTACT PERSON IN EVENT OF EMERGENCY:**

1: Name:      Address:      Phone:      Relationship:

2: Name:      Address:      Phone:      Relationship:

I understand and further agree to:

- ∞ **Submit income verification to ensure qualifications are met in accordance with Policy and Guidelines**
- ∞ **Authorize Métis Capital/Urban Housing Corporation to conduct inquiries re: the approval of my Application**
- ∞ **Submit a Personal Information Check and or Criminal Record Check when a housing unit is offered**
- ∞ **Sign a Lease Agreement**
- ∞ **Pet Policy – Strictly Enforced (Discuss exceptions with Tenant Relations Officer)**

**Please note:** The information we collect from you, such as your email address, will be used to provide you with tenant documents, communications and marketing from MUHC/MCHC. We will always treat your personal details with the utmost care and will never sell them to other companies for marketing purposes. **Confirmation of understanding Please initial:** \_\_\_\_\_

**Applications will NOT be processed until signed and dated.**

**SIGNED BY: APPLICANT:** \_\_\_\_\_

**CO-APPLICANT:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**ALL INFORMATION CONTAINED IN THIS APPLICATION WILL BE HELD IN STRICT CONFIDENCE**

Thank you for applying with Métis Capital/Urban Housing Corporation