

Reaching Home Program Assistance Application for Métis individuals or families who are homeless or on the verge of homelessness.

APPLICANT INFORMATION – MUST BE COMPLETED							
OTIPEMISIWAK MÉTIS GOVERNMENT TERRITORY:							
□ Battle River □ North Saskatchewan River □ Peace River □ Lower Athabasca □ Lesser Slave Lake							
NAME:			DO YOU SELF-IDENTIFY AS MÉTIS? YES NO				
			DO YOU HAVE AN OMG CITIZENSHIP CARD? YES NO IF YES, WHAT IS YOUR CARD #?:				
ADDRESS:			IF YES, WE	HALISY	OUR CARI)# <i>(</i> :	
*MUST INCLUDE CITY IF NO FIX	ED ADDRES	<mark>>:</mark>					
MAILING ADDRESS:							
BIRTHDATE:		GENDER:			MARITAL STATUS:		
	,	,		EMA	AIL:		
WORKING: ☐ YES ☐ NO	i	RETIRED: YES NO			IN SCHOOL: ☐ YES ☐ NO		
DO YOU HAVE A PHYSICAL OR MENTAL DISABILITY? 🗖 YES 🗖 NO (IF YES, DO YOU HAVE A CONFIRMED DIAGNOSIS, PLEASE LIST):							
CO-APPLICANT INFORMATION – IF APPLICABLE							
NAME:		DO YOU SELF-ID			ENTIFY AS MÉTIS? ☐ YES ☐ NO		
		DO YOU HAVE A			N OMG CITIZENSHIP CARD? ☐ YES ☐ NO		
ADDRESS: IF YES, WHAT IS YOUR CARD #:						D#:	
*MUST INCLUDE CITY IF NO FIXED ADDRESS:							
MAILING ADDRESS:							
BIRTHDATE:	GENDER:	GENDER:			MARITAL STATUS:		
PHONE #:	VETERAN ID (IF	ETERAN ID (IF APPLICABLE):		EMA	1AIL:		
WORKING: ☐ YES ☐ NO	i	RETIRED: ☐ YES ☐ NO			IN SCHOOL: ☐ YES ☐ NO		
DO YOU HAVE A PHYSICAL OR MENTAL DISABILITY? 🗖 YES 🗖 NO (IF YES, DO YOU HAVE A CONFIRMED DIAGNOSIS):							
HOUSEHOLD COMPOSITION EXCLUDING	G APPLICANT(S)	LIST BELO	W				
				RELATIONSHIP TO			
NAME		BIRTHDAT		GENDER		APPLICANT	
FINANCIAL INFORMATION – MUST BE COMPLETED							
WHAT IS YOUR CURRENT MONTHLY INCOME?: APPLICANT: \$ CO-APPLICANT: \$						APPLICANT: \$	
SOURCE OF INCOME							
AISH	OAS	OAS			☐ SUPPORT PAYMENTS		
☐ ALBERTA WORKS	☐ EMPLOYM	☐ EMPLOYMENT			☐ NO INCOME		
PENSION	☐ CHILD TAX	☐ CHILD TAX			☐ OTHER		
☐ CPP	☐ ALIMONY						

REASON FOR SUPPORTS CHECK ALL THAT APPLY:						
EXPERIENCING HOMELESSNESS (COUCH SURFING, IN A SHELTER, LIVING ON THE STREET)						
U ON THE VERGE OF HOMELESSNESS						
PLEASE CHECK ALL THAT APPLY – ARE YOU EXPERIENCING?						
☐ DOMESTIC VIOLENCE		☐ DRUG ADDICTION	☐ MENTAL HEALTH			
☐ ELDER ABUSE		UNEMPLOYMENT	PHYSICAL LIMITATIONS			
☐ FLEEING GANG AFFILIATION		☐ CRIMINAL RECORD				
CONSENT AND DECLARATION						
Métis Capital Housing Corporation collects and protects personal information under the authority of the Alberta Freedom of						
Information and Protection of Privacy Act to operate the programs and services of Métis Capital Housing Corporation.						
I/We authorize the Reaching Home Program (RHP) and its agents to exchange, confirm, and verify all information relating to my/our circumstances, including, but not restricted to, my/our personal information. I/We also consent to allow the RHP staff to communicate with me/us via my/our email address(es). I/We also release and save harmless the RHP and their representatives and all persons and organizations from any or all claims, actions, demands, and expenses in connection with or arising out of such release of information to or by RHP. My/Our consent remains in effect until I/we submit a letter stating that the RHP is no longer allowed to act on behalf of or release any information regarding anything listed above. I hereby confirm that I have completed this application voluntarily. I have responded to each inquiry within this application						
truthfully and to the best of my knowledge, ensuring that all details noted are accurate and comprehensive. Furthermore, I acknowledge and consent to release of this information as stated above. I am aware that any omission of pertinent						
information or provision of false information may lead to the termination of my application for the program in question.						
DATE:	SIGNATI	TURE OF APPLICANT:				
DATE:	SIGNATURE OF CO-APPLICANT:					
REQUIRED DOCUMENTS TO BE SUBMITTED FOR FUNDING						
Only completed applications will be processed. Incomplete applications will be reviewed, and the applicant will be notified of missing information. Once the application is completed, it will be submitted for review.						
Edmonton, AB T5L 0A Otipemisiwak Métis Two pieces of identif Verification of incom	A2 or en Governi ication. ie.	nailed to reachinghome@metishou ment citizenship card for applicants	_			

For further information or questions, please contact:

Métis Capital Housing Corporation 11923 121A Street Edmonton, AB T5L 0A2 1-877-458-8684

Email: reachinghome@metishousing.ca www.metishousing.ca