HOUSING APPLICATION

Note that all information will be held in strict confidence

| DATE: RECEIVED BY: | |
|--|-----------------|
| Applicant's Name: Band | #- |
| Home Phone: Work Phone: | Massago Dham |
| Present Address: | viessage Phone: |
| TYPE: Rent() Own() Other | |
| PRESENT LIVING ARRANGEMENTS, LOCATION A | |
| How long at present address? | |
| MARITAL STATUS: | |
| Couples with Children () Single Adults Single with Children () Elderly Married Couples without Children () Special Needs: | () |
| Namestatus() Relationship | Birthdate Ago |
| Namestatus() Relationship | _ Birthdate Age |
| Namestatus()Relationship | Birthdate Age |
| Namestatus() Relationship | Birthdate Age |
| Namestatus()Relationship | Birthdate Age |
| Namestatus() Relationship | BirthdateAge |

| FINANCIAL INFORMATION: | | |
|--|--------------------|---------------|
| NET INCOME (MONTHLY) | APPLICANT | CO-APPLICANT |
| Employment | | |
| UIC | | |
| Student/Band Sponsor | | |
| Other (Pension) | | |
| Social Assistance | | |
| TOTAL INCOME | | |
| EXPENSES | | |
| Present Rent | | |
| Utilities | | |
| Other | | |
| TOTAL EXPENSES | | |
| INCOME LESS EXPENSES= | | |
| Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z | | |
| Do you or your spouse own property and Yes()No() If yes, list address | /or a house(s) any | where? |
| | | |
| UIC or MSS Office: | | |
| F.A.W. or Counsellor's Name & Phone: | | |
| Current Landlord: | | |
| Address: | | 9: |
| Previous Landlord: | | |
| | | <u></u> |
| Address: | | |
| Have you previously rented from the Band' | ? Yes() | No () Page 2 |

EMPLOYMENT HISTORY

| Applicant: | |
|--|--|
| Present Employer: | Address: |
| Occupation: | |
| | Start: / / Finish: / / Full-time()Part-time()Temporary() |
| Previous Employer: | Address: |
| Occupation: | |
| | Start: / / Finish: / / Full-time () Part-time () Temporary () |
| CO-APPLICANT | , , , , , , , , , , , , , , , , , , , |
| Present Employer: | Address: |
| Occupation: | |
| Dates of Employment: | |
| Previous Employer: | Address: |
| Occupation: | |
| Dates of Employment: | Start: / / Finish: / / Full-time()Part-time()Temporary() |
| Desired Home: | |
| Type of house you are apply | ving for: Sec. 59 () Sec. 56-1 () Other |
| 1 Bedroom () 3 Bedro 2 Bedroom () 4 Bedro | om () |
| | notice to move: Yes () No () |
| Are you Handicapped? Ye | es() No() If yes, please specify below |
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| I/We declare that the information provided herein is true and correct, and realize that any false information provided will result in cancellation of the application. |
|---|
| I/We also authorize Band to make enquiries necessary to process this application. |
| I/We understand that accommodation availability is subject to placement on a waiting list and that the Band does not provide emergency shelter, nor can the Band accommodate "URGENT" referrals from other agencies. |
| Applications will be kept on file for one year. After one year, the applicant must submit a new application in order to maintain his or her position on the master waiting list. A new application is required in order to keep the Band advised of changing circumstances of applicants. Submitting a new application does not mean that the applicant goes to the bottom of the list; the applicant stays in the same place on the master list. |
| 1. 3 References attached. |
| 2. I have read and understood the Housing Policy Yes () No () |
| Applicant's Signature Date |
| Co-Applicant's Signature Date |
| Cellular Phone Number |