

## Application Process

### 1. Completing Your Application

- All applicants complete **SECTION 1** and **SECTION 4 (GREEN)**
- Apartment applicants complete **SECTION 2 (BLUE)**
- Lodge applicants complete **SECTION 3 (ORANGE)**

Applicants are only able to apply for one housing program. GEF offers six types of housing programs:

**Apartment** - Accommodation with a kitchen

- **Subsidized** - (Rent 30% of gross monthly income, income criteria required)
- **Affordable** - (Sakaw Terrace Option #1, Rosslyn Terrace and Ottewell Terrace - income criteria required. Sakaw Terrace Option #2 - 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)
- **Affordable** - (With a kitchenette, Sakaw Terrace, income criteria not required)

### 2. Submitting Your Application

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

- Dropping it off in person at GEF Seniors Housing, Central Services, 14220-109 Avenue
- Mailing it to GEF Seniors Housing, Central Services, 14220-109 Avenue, Edmonton, AB T5N 4B3
- Scanning and emailing it to [housingapplications@gef.org](mailto:housingapplications@gef.org)

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 GREEN SECTION**

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

## SECTION 1: CONTINUED

### 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: \_\_\_\_\_ Property Management Company: \_\_\_\_\_

Phone Number: \_\_\_\_\_

### Previous Landlord: *If you have rented at current rental for less than 2 years, please complete this section.*

Name: \_\_\_\_\_ Property Management Company: \_\_\_\_\_

Phone Number: \_\_\_\_\_ How long did you live here? \_\_\_\_\_

### What are your current monthly payments?

Rent/Mortgage \$ \_\_\_\_\_    Power \$ \_\_\_\_\_    Heat \$ \_\_\_\_\_    Water \$ \_\_\_\_\_    Other \$ \_\_\_\_\_

### Financial Information

### First Applicant

### Second Applicant *(if applicable)*

#### THIS INFORMATION IS MANDATORY FOR SUBSIDIZED, DUPLEX, AND AFFORDABLE HOUSING

**Line 150** from the most current income tax year from the Notice of Assessment. Year: 20\_\_\_\_\_

\$

\$

### Please check the boxes that reflect the sources of your income

Old Age Security (OAS)	<input type="checkbox"/>	<input type="checkbox"/>
Canada Pension Plan (CPP)	<input type="checkbox"/>	<input type="checkbox"/>
Guaranteed Income Supplement (GIS)	<input type="checkbox"/>	<input type="checkbox"/>
Alberta Seniors Benefit (ASB)	<input type="checkbox"/>	<input type="checkbox"/>
Assured Income for the Severely Handicapped (AISH)	<input type="checkbox"/>	<input type="checkbox"/>
Employment Income	<input type="checkbox"/>	<input type="checkbox"/>
Foreign Pensions	<input type="checkbox"/>	<input type="checkbox"/>
Other (e.g. Other pensions etc.) _____	<input type="checkbox"/>	<input type="checkbox"/>

### Housing Program (Select only ONE)

**Apartment**    Subsidized    Affordable    Duplex

▶ **GO TO SECTION 2 (BLUE) IF YOU SELECT APARTMENT**

**Lodge**    Subsidized    Affordable

▶ **GO TO SECTION 3 (ORANGE) IF YOU SELECT LODGE**

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

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

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

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

## 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 [www.gef.org](http://www.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 [www.gef.org](http://www.gef.org)

## SECTION 4: ALL APPLICANTS COMPLETE GREEN SECTION

### Other Information You Want To Provide

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

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

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
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)*

08.02.18

### OFFICE USE ONLY

GEF Applicant Code		Application Received Date Stamp
<b>Apartment</b> <input type="checkbox"/> Subsidized <input type="checkbox"/> Affordable <input type="checkbox"/> Duplex	<b>Lodge</b> <input type="checkbox"/> Subsidized <input type="checkbox"/> Affordable	
<b>Date Entered into Database</b>		
<b>Initial Follow-Up Date (e.g. phone call)</b>		
<b>Interview Date</b>		