

Reaching Home Assistance Application

Capital Housing Corporation

for Métis families who are homeless or on the verge of being homeless.

APPLICANT INFORMATION – M	UST BE COMPLET	ED						
NAME:					MN	A #:		
MNA REGION:								
ADDRESS:								
*MUST INCLUDE CITY IF NO FIXED ADDRESS:								
MAILING ADDRESS:								
BIRTHDATE: GENDER:		MARITAL STATUS:		US:		SIN#:		
PHONE #:	VETERAN ID (IF APPLICABLE): EMAIL:							
WORKING: ☐ YES ☐ NO RETIRE	D: YES NO	IN SCI	HOOL: 🗖 YES 🗖	INO	I E\/I	EL OF EDUCATION:		
ARE YOU DISABLED? YES NO (IF YES		114 301	1001. 🛥 113 🛥	1		TING A HOME? TYES TO		
CONNENTER NEITHING A HOME: CONNENTER NEITHING A HOME:								
HOUSEHOLD COMPOSITION EXCLUDING	ADDITIONNITED LIST	RELOVA!		<u> </u>				
			IDTUDATE CENDED		•	DELATIONICIUD TO ADDUCANT		
NAME	SIN	В	IRTHDATE	GENDE	`	RELATIONSHIP TO APPLICANT		
FINANCIAL INFORMATION – M	UST BE COMPLET	ΓED						
GROSS ANNUAL FAMILY INCOME FROM	THE PREVIOUS YEAR	:						
TOTAL GROSS ANNUAL INCOME INCLUD	ING OTHER SOURCES	: :						
SOURCE OF FUNDING:								
PLEASE SELECT ALL THAT APPLI	S:							
PREVENTION + REFERRALS (RENTAL	•							
☐ HOUSING (CURRENTLY HOMELESS, EMERGENCY HOUSING, HOUSING PLACEMENT) ☐ CLIENT SUPPORT (ECONOMIC INTEGRATION, HEALTH & MEDICAL, ADDICTION & TREATMENT REFERRALS)								
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PLEASE PROVIDE MORE DETAILS A A. WHERE ARE YOU CURRENTLY LO		KI 15 I	KEQUESTED A	ND <mark>WIUST B</mark>	E CO	WIPLETED		
	(e)							
B. ARE YOU EXPERIENCING (PLEAS	E CHECK ONE)							
☐ HOMELESSNESS (COUCH-SURFING, LIVING ON THE STREET, IN A SHELTER)								
☐ FACING EVICTION OR UTILITY DISCONNECTION (SERVED WITH AN EVICTION NOTICE)								
☐ FLEEING DOMESTIC VIOLENCE (IN A WOMEN'S SHELTER, SAFE HOUSE)								
☐ OTHER (PLEASE EXPLAIN)								

C.	WHY DO YOU NEED SUPPORT FROM REACHING HOME?

DECLARATION

I declare that I have prepared this application. I have provided an answer to every question on this application. The answers and information are true, accurate and complete to my knowledge, and all required disclosures and other documentation have been provided. I understand and agree that failure to provide complete and truthful answers will result in my termination from the program to which I have applied.

	DATE:	SIGNATURE OF APPLICANT:
DATE: SIGNATURE OF CO-APPLICANT:		SIGNATURE OF CO-APPLICANT:

REQUIRED DOCUMENTS TO BE SUBMITTED FOR FUNDING

Applications will not be processed unless all documents below are submitted

- 1. Completed and signed original application could be mailed/dropped off at 11923 121A Street NW, Edmonton, AB T5L 0A2 or emailed to reachinghome@metishousing.ca
- 2. Métis Nation of Alberta citizenship card for applicants
- 3. Two pieces of identification.
- 4. Canada Revenue Agency Notice of Assessment from the previous year.
- 5. 90 Day Bank Statements from the date of application
- 6. Signed Consent to Release (attached to application)

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

Only completed applications will be processed. Incomplete applications will be reviewed, the applicant will be notified for any missing information. Once application is completed, the application will be submitted for review.