

## **Application for Single Accommodation**

(Please print)

	Applica	ation Date:		
A BAPTIST HOUSING COMMUNITY				
Name:		First Name		
Last Name		First Nam	e	Date of Birth
Current Address:				
Street Address			City	Postal Code
Phone Number:		Email:		
Evergreen Manor is a Seniors Supporti Housing. We currently have 85 subsid completing a Residency Agreement. A must be completed with the residence confirmed.	ized suites. Appl an assessment of	licants may ap	oply for a sub y to live at lo	sidy toward the costs when w risk within Supportive Housing
To assist us in reviewing your application  Ambulation: Independent □ Wheelcha  Do you currently receive home-care: `\	air $\square$ (We have fo	our suites ada	pted for whee	elchair access.)
Currently Monthly Income: Between \$	1,000 - \$1,500 🗆	\$1,500 - \$2,50	00 □ \$2,500 +	· 🗆
According to your latest Personal Incon Less than \$51,500 in the last calendar y	•		- ·	
Family Contact(s)				
#1 Name: Last Name		First Name		
Address:				
Street Address		City		Postal Code
Home Phone:	Cell Phone:		E-N	1ail
#2 Name:				
#2 Name: Last Name		First Name		
Address:				
Street Address		City		Postal Code
Home Phone:	Cell Phone:	E-Mail		
Reference:				
Name:		Phone:		
Relationship to you:				