

# Affordable Housing Application Form



Before completing this application form please review the unit types, rental rates & eligibility criteria:

## Unit Types & Rental Rates

Unit Type	Minimum Annual Household Income	Maximum Annual Household Income	Minimum # of occupants	Maximum # of occupants	Rent rates monthly
Studio (12 units)	\$32,680	\$43,000	1	2	\$817
One-bedroom (9 units)	\$38,040	\$57,500	1	2	\$951
Two-bedroom (6 units)	\$58,720	\$69,500	2	Family of 4 OR up to 3 non-related adults	\$1,468
Four-bedroom (6 units)	N/A	N/A	4	Family of 6 OR up to 4 non-related adults	\$2,600

## Eligibility Criteria

The YWCA Banff will initially assess each application using the following basic criteria:

- Meets Parks Canada's 'Eligible Resident' requirements
- Annual household income falls within required range for unit available
- Type of unit required can be matched to number of occupants or specific accessibility needs
- Canadian citizen; permanent resident or temporary foreign worker whose visa is longer than one year
- Not owning real estate in Canada

## General Information

Number of Occupants:

Adults:

Children/Dependents:

Do you need an accessible unit?

Yes

No

Preferred Unit type

Preferred Size- Based on qualifying income and number of occupants

Studio

One-bedroom

Two-bedroom

Four-bedroom

## Children/Dependents

(include all children/dependents to live in the rental unit)

Name	Relationship	Birthdate

## Applicant Information

Each adult identified on this form is required to complete the applicant information.

**Applicant Name:**  
Please use your legal name.

**What are your pronouns?**

**Do you identify as an Indigenous person?**      Yes      No

**Phone:**      **Email:**

**Date of Birth**

**Do you have a vehicle?**      Yes      No      If yes, vehicle type:

## Employment

Please provide your current/most recent employment information. If you have two or more jobs, please list all of your employers.

Employer	Start Date	Hours of Work (Weekly)

**Annual Gross Income:**

## Current Accommodation

**Current Accommodation Type:**

Private Rental

Staff Accomodation

Other

**Street Address:**      **Town:**

**Postal Code:**

**What is your current monthly rent?**

## FOIP Notification

The personal information you provide on this form is being collected under the authority of Section 33(c) of Alberta's Freedom of Information and Protection of Privacy Act. This information will be used by the YWCA Banff to determine eligibility for and to administer the affordable housing program. The privacy provisions of the Freedom of Information and Protection of Privacy Act protect your personal information.

By signing below, I agree and give consent to the YWCA Banff to contact my employer(s) to collect/release my personal information in order to determine eligibility.

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Signature

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Date

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