Affordable Housing Application Form



Updated December 2024

Our belief is that everyone deserves affordable housing.

YWCA Banff aims to provide suitable, affordable and community-based living to the most vulnerable individuals and families in our community.

Please note that completing this application does not guarantee placement on the waitlist. We encourage you to answer the questions as thoroughly as possible. Alternatively, if you would prefer to complete your application with a supportive staff member, please contact housing@ywcabanff.ca.

Additionally, to reside in the Town of Banff, you must meet legislated eligibility criteria. For more information, please visit the Parks Canada website. Applicants must also meet specific income thresholds to qualify for the YWCA Banff housing program, which vary by unit and are detailed further in this application. Income thresholds are determined by the Government of Alberta.

If you find you do not qualify for the Housing Program but still need support accessing community resources, please contact housing@ywcabanff.ca to connect with a member of the team.

Disclaimer:

All personal information is stored using security encryption protocols, a secure server, and with the use of two-factor authentication. Applicant information collected and shared will exclude client identifiers. Limits of confidentiality and corrective actions (which may include contacting authorities) will apply under the following conditions:

- If a YWCA Banff staff member has reason to believe that your life or someone else's life is at imminent risk
- If a YWCA Banff staff member has reason to believe that child(ren) are at risk (neglect, abuse)
- If the file(s) are subpoenaed

General Information
Number of Adults: Number of Children/Dependents (Under the age of 18):
Do you need an accessible unit? Yes No
If you require an accessible unit, please include any relevant details below:

Unit Types

*Disclaimer: Rental rates and inventory type subject to change.

Which unit(s) are you applying for? Check all that apply.

[GB] Small single room with shared

washrooms, showers, and kitchens

The control of the same applying for a check an interapply.								
Shared Residence (Furnished)								
	Unit Type	Rent Price*	Maximum Income Threshold	Maximum Occupants				
	[MB1] Single private room with private washroom/shower and shared kitchen	\$24.00 per day	\$61,500	1				
	[MB2] Double room with private washroom/shower and shared kitchen	\$32.00 per day	\$61,500	2				
	[Oreo1] Single bedroom with shared washroom/shower and shared kitchen	\$21.50 per day	Not Applicable	1				
	[Oreo2] [Female-Only Floor] Single bedroom with shared washroom/shower and shared kitchen	\$20.50 per day	Not Applicable	1				
	[Oreo3] Single bedroom with private washroom, shared showers, and shared kitchen	\$22.50 per day	\$61,500	1				

Dr. Priscilla Wilson's Place (Unfurnished) **Maximum Income** Maximum **Unit Type Rent Price* Threshold** Occupants \$817.00 \$61,500 (total [STU] Studio 2 per month household income) \$951.00 \$69,500 (total [1BDR] One Bedroom 2 household income) per month \$1468.00 \$80.000 (total [2BDR] Two Bedroom 4 household income) per month \$2600.00 [4BDR] Four Bedroom \$61,500 per adult 6 per month

\$18.50 per day

\$61,500

1

Do you have any pets? If so, p	lease explain below inc	cluding type of pet	and weight of pet	•
Please note that pets will be considered o	n a case-by-case basis in Prisci	illa's Place housing. Pets a	re not permitted in Share	d Residence.

Primary Applicant: Contact Information

This individual will be the main point of contact for this application

Primary Applicant Name	
First Name:	Last Name:
Additional Applicant Names: List the intended occupants for the unit if applicable.	
Pronouns: Please select the pronouns used by the primary applicant.	
☐ She/Her/Hers ☐ He/Him/His ☐ They/Them/Theirs ☐ Prefer Not to Say ☐ Other:	
Phone Number:	Email Address:
What is your preferred method of contact? Phone	☐ Email
Date of Birth:	_
mm/dd/yyyy	
What is your current employment status?	
☐ I am currently employed by a business operating in Banff Nation ☐ I currently own a registered business operating in Banff Nation ☐ I am not employed by a business operating in Banff National Pa ☐ I am currently unemployed	al Park rk
If applicable, what is your current/most recent employ	ver?
If applicable, how long have you been employed at you	ur current/most recent place of employment?

Financial Information

What was your total annual household/individual income, as indicated in your Notice of Assessment (line 15000) from the previous year (before taxes)?
What is your expected approximate total annual household/individual income for next year?
What are your current housing costs, including all utilities?
What is your current living situation? Please explain. (For example: type of housing, number of roommates/housemates, length of lease, any other relevant challenges or details).

Additional Information

Disclosure of this information is optional. Do you or anyone in your household identify as a woman? ☐ Yes ☐ No ☐ Prefer Not to Say Do you or anyone in your household identify as belonging to any of the following groups? Check all that apply. Seniors (age 65+) ☐ Indigenous Peoples Person with a disability Person dealing with mental health and addictions ∇eteran ☐ 2SLGBTQIA+ Racialized Groups ☐ Newcomers (including refugees) Individual/family experiencing homelessness/precarious housing ☐ Individual experiencing impactful medical concerns If you would like to share additional information about yourself, your experiences, or your housing situation that you believe should be considered during the review of your application, please explain below:

Other Considerations

I understand that to be considered for housing, all adults included in the application must comply with Parks Canada's Need to Reside Legislation for the duration of my stay in the housing program. Additionally, if I am accepted, I will be required to provide proof of employment in Banff National Park every six months. Failure to provide this documentation may result in eviction.
☐ Yes ☐ No
I understand that to be considered for housing, my individual or household income must fall within the income threshold for the unit I am applying for. If I am accepted into the housing program, I will be required to provide a copy of my Notice of Assessment annually. Failure to provide this documentation may result in eviction.
☐ Yes ☐ No
I understand that completing this application does not guarantee placement on the housing waitlist.
☐ Yes ☐ No
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.
Full Name:
Signature:
Date:
The place of the WACA Parish Affordable Housing Programs. Places submit this application by

Thank you for applying to the YWCA Banff Affordable Housing Program. Please submit this application by bringing a printed copy to the housing office located at YWCA Banff (102 Spray Avenue). Alternatively, you can email a scanned copy of this application to housing@ywcabanff.ca.

Please note: Waitlist times vary per unit.

A YWCA Banff staff member will reach out within 10 business days of receipt to confirm whether you have been added to the housing waitlist based on eligibility requirements. Email, phone, and in-person inquiries regarding application status, prior to 10 business days, will not be answered.