

YU-TURN HOUSING

# PROGRAM APPLICATION

---

## PERSONAL INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Current Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Drivers License #: N/A Social Insurance #:

Date of Birth: \_\_\_\_\_ Alberta Health#: \_\_\_\_\_

## GUARDIAN INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

## PREVIOUS RENTAL HISTORY - Not applicable - has never rented

Landlord / Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Landlord / Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Have you ever lost a security deposit? \_\_\_Yes \_\_\_No If 'Yes' Why/ Details? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If you are not currently renting, what is your living arrangement at this time? Lukas is living with his mother

## BACKGROUND INFORMATION

---

---

Why are you hoping to enter the YU-Turn Housing Program? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any known allergies, medical concerns or health issues? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any children?  Yes  No If 'yes', what are their ages? \_\_\_\_\_

What is your custody arrangement? \_\_\_\_\_

\_\_\_\_\_

Do you have a Child and Family Services Caseworker?  Yes  No

Worker's Name: \_\_\_\_\_ Worker's Phone : \_\_\_\_\_

Are you on Probation?  Yes  No

Probation Officer's Name: \_\_\_\_\_ Probation Officer's Phone: \_\_\_\_\_

Do you have any outstanding charges?  Yes  No

Details? \_\_\_\_\_

Do you have any outstanding Fines, Surcharges or Debt ?  Yes  No

Details? \_\_\_\_\_

Do you or have you faced challenges with addiction?  Alcohol  Street Drugs

Prescription Drugs  Food  Sex

What have you already put in place to support your recovery? \_\_\_\_\_

\_\_\_\_\_

## EDUCATION INFORMATION

---

Central Alberta Youth Unlimited / YFC



5025 50st Lacombe, AB T4L 1X9



403-789-CAYU



info@cayu.ca



www.cayu.ca

---

Are you currently attending school? \_\_\_\_Yes \_\_\_\_No

If yes, where are you attending? \_\_\_\_\_

What is your highest level of education? \_\_\_\_\_

Do you have any other certificates or training ie. WHMIS, First Aid, Food Safety etc.

(please list). \_\_\_\_\_

### EMPLOYMENT INFORMATION

Current Workplace: \_\_\_\_\_ Start Date: \_\_\_\_\_

Manager's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Previous Workplace: \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

### REFERENCES *(please provide at least one that knows you from outside of work)*

1. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Position / Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

2. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Position / Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

I certify that the information I have provided is complete and accurate, and I understand that Central Alberta Youth Unlimited/YFC may use the contact information I have provided to contact any or all of the references, employers, landlords or workers listed on this application.

Name: \_\_\_\_\_ Participant Signature: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ *(If participant is under 18)*

Date: \_\_\_\_\_

