

COLUMBIAN CENTRE APPLICATION

NO SMOKING FACILITY - NO PETS

205 - 13th St. West, Prince Albert, SK S6V 7N2

306-922-2833 (office) OR 306-981-3806 (cell) OR kcpainc@sasktel.net

Email, mail or deliver the completed application form to one of the addresses above.

Name: _____

Date of Application: _____

Address: _____

Postal Code: _____

Phone: _____

Marital Status: _____ Age: _____

Cell Phone: _____

Date of Birth: _____

Name of person moving in with you: _____ Age: _____

Date of Birth: _____

ACCOMMODATION REQUIRED

Continental _____ One Bedroom _____ Two Bedroom (COUPLES) _____

Do you need a suite suited for a wheelchair: Yes / No

State of your health? _____ Your partner's health? _____

If not good, please explain: _____

Name of your doctor: _____ Doctor's phone #: _____

Please describe your need to move into the Columbian Centre: _____

Name of references:

1) _____ Phone #: _____

2) _____ Phone #: _____

Next of KIN: _____ Phone #: _____

Relationship to you _____

Damage Deposit required is One Month's Rent.

Management Use Only

MOVE IN DATE: _____

MOVE OUT DATE: _____