

**QALIPU FIRST NATION
“I’TESNEN: WE ARE STAYING”
EMERGENCY HOUSING RELIEF APPLICATION**

Introduction:

“I’tesnen: We are Staying” Qalipu Emergency Housing Support Program aims to help prevent and reduce homelessness among our members. Existing supports include:

- Emergency Housing Set-Up: Provide rental set-up assistance (first month’s rent and damage deposit).
- Prevention and Shelter Diversion: Provide assistance for rental or utility arrears to prevent eviction.
- Emergency Housing: Provide short-term placement for a maximum of five (5) nights.

Program Eligibility:

- Applicant/Co-applicant must be a registered member of Qalipu First Nation.
- Applicant/Co-applicant must identify as currently homeless or at risk of becoming homeless.
- Applicant/Co-applicant must be a resident of Newfoundland and Labrador.
- Applicant/Co-applicant must not be a homeowner; this includes rent-to-own.
- Applicant/Co-applicant must not have received support under this program within the current fiscal year.

Please Note:

- Due to limited funding, this program is intended to be a one-time support. Maximum allowable amounts apply.
- The landlord must not be an immediate relative of the applicant or co-applicant.
- Reimbursements for previously paid rent, damage deposit, previously accumulated hotel bills, or other housing related expenses are not eligible under this program.
- Limit one application per household. Duplicate applications will not be processed. If duplicate applications are received, the first application submitted will be considered the valid application.
- If the rental agreement is in the name of a non-member spouse, partner, or co-applicant, you may still apply. However, additional documentation will be required to verify that you reside in the same household.

Application Process:

- Applications will be processed in order of the date received until funds have been exhausted.
- Complete **all** sections of the application, including “please explain” sections.
- Submit your completed application with **all** required supporting documents to the following:

Mail:		Call or E-mail:
Qalipu First Nation Housing Division 3 Church Street Corner Brook, NL A2H 2Z4	OR	Qalipu First Nation Housing Division 709-634-0996 housingproject@qalipu.ca

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Section 1 – Contact Information

Band Registration Number:	0	3	4							
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Applicant Name: _____
First Last Initial

Address: _____
Street Address/Mailing Address

City/Town Province Postal Code

Phone: _____ **Email:** _____

Co-applicant information is required if the rental agreement is not in the name of a registered band member.

Co-applicant Name: _____
First Last Initial

Phone: _____ **Email:** _____

Section 2 – Household Information

Are you currently homeless or at risk of becoming homeless? YES NO

If YES, please explain: _____

Are you currently on income support? YES NO

Are you receiving housing support under the Newfoundland & Labrador Housing Corporation? YES NO

Have you recently experienced homelessness? YES NO

How many occupants currently reside in your home? _____

How long have you lived in your current home? _____

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Section 4 – Declaration and Agreement

1. I certify that I am a member in good standing of Qalipu First Nation.
2. I declare all information provided in this application to be complete and true.
3. I understand that the information provided in this application is collected for the purpose of administering Qalipu First Nation Housing Programs and is in accordance with Qalipu First Nation confidentiality.
4. I understand that this application does not constitute an agreement by Qalipu First Nation to provide housing assistance.
5. I authorize Qalipu First Nation to investigate and verify all statements and information provided on this application and throughout this application process.
6. I am aware that discovery of any false statements or fraudulent documentation provided throughout the application process will render this application null and void.
7. I agree that any and all action by Qalipu First Nation and staff will be without penalty or liability for damages.

Before signing, please verify that all required supporting documents have been attached: YES

Signature of Applicant

Date

Signature of Co-applicant

Date

Please submit your application with all required supporting documents to the following:

<p>Mail:</p> <p>Qalipu First Nation Housing Division 3 Church Street Corner Brook, NL A2H 2Z4</p>	OR	<p>Call or E-mail:</p> <p>Qalipu First Nation Housing Division 709-634-0996 housingproject@qalipu.ca</p>
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