

Cornerstone Landing Youth Housing Program Application

Maple Ridge Pitt Meadows Community Services is proud to announce Cornerstone Landing as the community's newest rental housing option. Cornerstone Landing is conveniently located within the downtown core of Maple Ridge at 22772 119th Avenue.

In partnership with BC Housing, our youth housing program offers 20-subsidized studio suites for young people who currently reside in the communities of Maple Ridge or Pitt Meadows, are between the ages of 18-24 years and are deemed vulnerable due to significant adverse conditions.



Please submit your completed application to the Tenant Liaison Workers. They can be reached at youthhousing@comservice.bc.ca

This application package includes:

- ❖ Eligibility Criteria
- ❖ Application Process
- ❖ Application Form
- ❖ Application Requirements Checklist

Eligibility

The Youth Housing Program within Cornerstone Landing is available for young people, living in Maple Ridge or Pitt Meadows, between the ages of 18-24 years and who are deemed vulnerable due to significant adverse condition. Eligible young people must be permanent residents of Canada, living in Maple Ridge or Pitt Meadows.

Cornerstone Landing will assess each applicant's need for housing based on criteria which includes the applicant's income, current living situation and personal and family requirements to ensure that priority is given to applicants in the greatest need.

Cornerstone Landing Offers Rent Geared to Income (RGI): A type of housing where we calculate your rent according to the tenant's income. RGI units are rents that are based on 30% of your income. The base rental amount for one person, according to BC Housing, is \$375.00 which is the amount that is required to be paid by the tenant.

Application Process

This application form is designed to collect specific information from applicants seeking housing in accordance with section 26 (c) of the Freedom of Information and Protection of Privacy Act (the FOI Act). Cornerstone Landing will use this information to determine your eligibility for the youth housing program.

Once your completed application is received by the youth housing team, the application is submitted to the Youth Housing Program Screening Committee for vetting and approval. Successful applicants are notified, via email or text, within 7-days of the committee's review.

Applicants on the waitlist should update your application if any of your information changes and as well as every six months.

It is important to provide day and evening phone numbers, or the phone number of a contact person so that we can contact you if a unit becomes available. If we aren't able to reach you after three attempts to the given contact information, this is documented and your application will be moved to the bottom of the waitlist.

What is required in my application?

Application Requirements Checklist:

- ❖ A copy of Government Photo ID or Passport
- ❖ Proof of income in the form of one of the following:
 - Last Year's Notice of Assessment if you are a student or self employed
 - 3 most recent paystubs
 - Letter on company letterhead confirming wage and employment status
 - Proof of Income Assistance amount with government documentation
- ❖ 3 months most recent worth of bank statements, highlighting any additional income for example, GST.
- ❖ Void Cheque or auto withdrawal form
- ❖ Contact information and 2 reference letters from your Social Worker or Support Worker.
- ❖ Please make sure to fill out the form completely and don't forget to sign the last page

YOUTH HOUSING APPLICATION FORM

(Please send completed forms to youthhousing@comservice.bc.ca)

A. PERSONAL INFORMATION

First Name: Enter First Name here

Last Name: Enter Last Name here.

Address: Enter Address here

Province: Enter Province here

Cell Number: Enter cell number here

Postal Code: Enter postal code here

Legal Name: Enter Legal Name here.

Preferred Name: Enter Name here

City: Enter City here

Message Number: Enter number here

Message Contact Name: Enter text.

Email: Click here to enter text.

Birthdate: Click here to enter a date.

Gender:

Age: Click here to enter text.

Pronoun: Click here to enter text.

Registered with BC Housing? Choose an item.

If yes, Enter BC Housing number Click here to enter text.

Accessibility Requirements Choose an item.

Accessibility Requirements: Enter text here.

Please include a character reference/letter:

Ask someone who knows you well and is aware of your current situation to tell us a little bit about you and why they feel this would be a good opportunity for you. Please attach that character reference/letter to this application.

Now it's your turn:

Tell us a little about yourself and share what's been coming up that's impacting you. Describe why you believe this Youth Housing Program would be helpful to you and the difference it would make in your life. Please describe here

It's also important you know:

Your application is being reviewed for suitability within the Cornerstone Landing Youth Housing Program. I know it may feel hard to write some of this stuff, and at the same time we want to know how we can support you best.

All residents/participants of the Cornerstone Landing Youth Housing program:

Are required to work with Tenant Liaison Worker(s) regularly on skill development that reduces risks of homelessness such as life skills, financial literacy, accessing community resources, employment,

counselling etc. Are you willing to sign an agreement letter highlighting this requirement and your commitment to the program? Choose an item.

Are there any areas in particular you think would be important for us to know about, to better support you? Please describe here

Please tell us more below:

Mental Health concerns/diagnosis: Please describe here

Substance use concerns: Please describe here

Boundaries, relationships & communication: Please describe here

I understand that an in-person interview with the housing team will be required as part of the selection process. An interview does not guarantee admission into the housing program. This process allows us to get to know you a little more and answer any questions you may have. Choose an item.

I ACKNOWLEDGE THAT THIS IS A 100% SMOKING TOBACCO, MARIJUANA AND VAPING PROHIBITED PREMISES (there is a designated area outside of the building. However, using these substances in your suite will not be allowed). Choose an item.

B. SUPPORT

Social Worker Name: Click here to enter text.

Social Worker Phone Number: Click here to enter text.

Agency and Office Location: Click here to enter text.

What are you working on together: Click here to enter text.

Support Worker Name: Click here to enter text.

Support Worker Number: Click here to enter text.

Agency and Location: Click here to enter text.

What are you working on together: Click here to enter text.

Social Worker Name: Click here to enter text.

Social Worker Phone Number: Click here to enter text.

Agency and Office Location: Click here to enter text.

What are you working on together: Click here to enter text.

Support Worker Name: Click here to enter text.

Support Worker Number: Click here to enter text.

Agency and Location: Click here to enter text.

What are you working on together: Click here to enter

Please do share if there are other supports you'd like us to know about. The reason we ask is so we can support with wrap around care and services that provide opportunities and reduce as many barriers.

Do you expect the number of people in your family to change in the next 12 months? (Pregnancy, family joining, family leaving) Choose an item.

If Yes – Please explain: Click here to enter text.

C. RESIDENCY HISTORY

How many years have you lived in Canada?

Years: [Click here to enter text.](#)

Are you currently under sponsorship? Choose an item.

If yes, sponsored by: [Click here to enter text.](#)

Please list your address (es) for the past 2 years.

Address	Move in date	Move out date	Landlord Name	Phone number

Have you previously lived in subsidized accommodation? Choose an item.

If yes, what was the name and/or address of the location? [Click here to enter text.](#)

How long did you live there?

From: [Click here to enter a date.](#)

To: [Click here to enter a date.](#)

D. INCOME INFORMATION

Gross Monthly Income before deduction (\$): [Click here to enter text.](#)

Income Source (i.e. employment, EI, income assistance, PWD, etc.): [Click here to enter text.](#)

Are you a student? Choose an item.

Are you working? Choose an item.

How many hours per week do you work? [Click here to enter text.](#)

Employer Name [Click here to enter text.](#)

Contact Person Name [Click here to enter text.](#)

Phone Number [Click here to enter text.](#)

Are you volunteering? [Click here to enter text.](#)

How many hours a week do you volunteer? [Click here to enter text.](#)

Volunteer Location [Click here to enter text.](#)

Contact Person Name [Click here to enter text.](#)

Phone Number [Click here to enter text.](#)

E. CURRENT ACCOMODATION

Please describe your current living situation in as much detail as possible.

Describe your current living arrangements. [Enter text here](#)

Are you couch surfing? [Choose an item.](#)

Are you staying in a shelter, or homeless? [Choose an item.](#)

Please provide the information below:

Your current monthly rent \$: [Click here to enter text.](#)

Does your rent include heat? [Choose an item.](#)

How many bedrooms do you have now? [Click here to enter text.](#)

Does your current living space have a bathroom? [Choose an item.](#)

Does your current living space have a kitchen? [Choose an item.](#)

Current living space is: [Choose an item.](#)

Please describe your level of vulnerability and risk: [Click here to enter text.](#)

F. REASON FOR MOVE

Are you under notice to end your present tenancy? [Choose an item.](#)

If yes, please attach a copy of the Legal Notice to End a Residential Tenancy from your landlord.

If you are not under notice, why do you wish to move? (Please be specific. Attach sheet for additional information.): [Click here to enter text.](#)

G. DECLARATION: Please read and sign this statement

I declare:

This is my application; and all the information in it is correct and complete to the best of my knowledge and belief.

I authorize:

Pursuant to the Freedom of Information and Protection of Privacy Act (FOIPPA), Maple Ridge/Pitt Meadows Community Services to make any inquiries that are necessary to verify the information given in this application; and pursuant to the FOIPPA, any person, corporation, or social agency to release to Maple Ridge/Pitt Meadows Community Services any information pertinent to the assessment of my application; and Maple Ridge/Pitt Meadows Community Services to receive and exchange with credit bureaus and my previous landlords credit and other information about me, to be used in the decision making process to provide me with rental accommodation.

I understand:

That, in accordance with section 33 (c) of the FOIPPA, the information on this application may be shared with other affordable housing providers in order to increase my opportunities for rent-gearred-to-income housing; and that this application does not constitute any agreement on the part of Maple Ridge/Pitt Meadows Community Services to provide me with rental accommodation; and that it is my responsibility to advise Maple Ridge/Pitt Meadows Community Services of any changes to the information given in this application and to provide and supporting materials required for my application.

Signature of Applicant: [Click here to enter text.](#)

Application Date: [Click here to enter a date.](#)