

PRE-APPLICATION FORM

Dear Applicant:

We are pleased to be able to offer you the opportunity to apply for residence at High Street Manor, a high-quality, affordable elderly housing complex. To make the application process run as smoothly as possible, we would appreciate you taking a few moments to complete the following form in its entirety.

1. Name of household head: _____

2. Your complete current address: _____

3. How may we reach you? Home phone # _____ Work phone # _____

4. Please list the names of all members of the household who will occupy this apartment.

_____ Birthdate: _____

_____ Birthdate: _____

5. What is the total gross income (before taxes) per year of all members of the household who will occupy the apartment, including employment income, income from assets, pensions, government benefits, and all other sources? _____

6. Are you or any members of your household full-time students carrying a full course load (as defined by the educational institution) for at least five months per calendar year?

Yes No

7. Are all members of your household 62 years of age or older?

Yes No

8. How did you hear about our facility? _____

9. Would anyone in your household benefit from an accessible unit? _____

PLEASE RETURN THIS QUESTIONNAIRE IN THE ENCLOSED PRE-ADDRESSED ENVELOPE AS SOON AS POSSIBLE.

Thank you for your time and assistance.

Sincerely,
Selinsgrove Elderly Housing Associates



Equal Housing