

# Banff Access Program Application



## Section 1: My Information

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

Street Address \_\_\_\_\_

P.O. Box: \_\_\_\_\_ Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone (H): \_\_\_\_\_ (C): \_\_\_\_\_ Email: \_\_\_\_\_

## Section 2: Family Information

Complete this section if you are also applying for your spouse and/or your children 17 years of age and under and **living at the same Banff address.**

Name	Relationship to Applicant	Date of Birth (YYYY/MM/DD)

## Section 3: Income verification documents

Provide the following for each adult income earner:

- Proof of residency for 3 months prior to application
- 2016 Income Tax Notice of Assessment **and/or**
- Three current paystubs **or**
- Government issued benefits (i.e. AISH, EI, Disability)

**Please note: The size of family is based on family members living together in Banff**

Size of family	Total before tax (gross) income
1 person	\$32,434
2 persons	\$40,379
3 persons	\$49,641
4 persons	\$60,271
5 persons	\$68,358
6 persons	\$77,095
7 or more persons	\$85,835

## Section 4

Please answer all the questions. All information is confidential. Your application will NOT be processed if this page is incomplete.

### 1. Your Residency Status is:

- Canadian Citizen
- Permanent Resident
- TFW/Work Permit

### 2. Where were you born? \_\_\_\_\_

### 3. How long have you lived in Banff?

- 3 – 6 months    6 mo – 1 year    1 year – 3 years    3 – 5 years    5 – 10 years    10+ years

### 4.. Have any of your family members moved to Banff within the last 12 months? Yes   No

- If yes, how many? \_\_\_\_\_

### 5 . Are you currently employed? Yes   No   Retired   Government issued benefits (i.e. AISH, EI, Disability)

- If yes:    Full time    Part time    Seasonal
  - Do you work more than one job?    Yes    No

### 7. How did you hear about the Banff Access Program?

- Town staff    banff.ca/heretohelp    Internet Search    School
- Newspaper    Friend    Agency referral    Settlement Services

## Section 5:

Please read and sign this section. The information I have provided is complete and true and I am a resident of the Town of Banff.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date (YYYY-MM-DD)

## OFFICE USE ONLY

Family income:	Income #1	Income #2
Notes		
NEW   RENEWAL		

This personal information is being collected under the authority of the Municipal Government Act for the purpose of participating in the Banff Access Program. It is protected under the privacy provisions of the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection, contact Community Support Services at 403.762.1251 or at the Town of Banff, Box 1260, Banff, AB, T1L 1A1