

Meadow Lake Campus Residence Application 2024-25



It is important to know that applying for student housing is separate from the general program application process at the College. It is a requirement of the Student Housing application that you be a student – defined as follows:

“An individual who is accepted as a full time student into a program being offered by the College or its post-secondary partners and who is in good standing at North West College”.

The application form lists areas of preference, unit type, roommate etc., please fill in the application form according to your interest and we will try to accommodate your request. For more information, please contact 306-234-5100.

All applicants for student housing are required to complete the income declaration section of the Residence Application.

Use the checklist below to ensure that your application is complete and can be processed by the Residence Office.

- Application for Residence is complete
- Tenant Income Verification is complete listing ALL members of the household (your family members that will be living in the unit with you) and indicating ALL sources of income with the exception of Universal Child Care Benefits, GST, and the Child Tax Benefit.
- Letter of Acceptance OR proof of registration into your program of study.

All approved applicants for student housing are required to sign a Residence Agreement. The College encourages potential residents to read the Agreement and related Residence Handbook as soon as possible and ask any questions they have regarding policies and operations of North West College’s Student Housing.

Room assignments will be provided upon signing of Residence Agreement and payment of security deposit informing students about their unit and room numbers as well as roommates if applicable.

If you have any questions about the application process please contact:
Meadow Lake Campus, Residence Clerk at 306-234-5100
Email: residences@northwestcollege.ca

APPLICATION FOR STUDENT HOUSING Meadow Lake Campus



PRIVACY POLICY – The personal information on this form is collected and protected under the provisions of the Freedom of Information and Protection of Privacy Act. This personal information is used to determine and verify your eligibility for Housing, for uses consistent with this purpose, and will not be shared with any party outside the College and the Saskatchewan Housing Corporation without your written permission, unless permitted or required or law.

APPLICANT INFORMATION – Completed by ALL applicants

Last Name		First Name		Initial	E-mail Address
Permanent Mailing Address			City/Town		Province
					Social Insurance Number
Postal Code	Phone Number:		Gender		Date of Birth (d/m/y)
	Alternative Number:		<input type="checkbox"/> Male <input type="checkbox"/> Female		/ /
Length of residency at above:	If less than 1 year at above, give previous address:			SK Health #	
				Previously lived in NWC ML Student Housing? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, Year:	

ACCOMMODATION REQUEST – Completed by ALL applicants

Dates Required for Housing:		Accommodation Preference: Mark 1 st , 2 nd , 3 rd choices			
From:	To:	<input type="checkbox"/> SINGLE Occupancy		<input type="checkbox"/> FAMILY Occupancy	
Program of Study:		___ 1 Bedroom (\$800/mo)		___ 2 Bedroom (\$850/mo)	
Program Duration:		___ 2 Bedroom (\$650/mo)		___ 3 Bedroom (\$1075/mo)	
Academic Year:		___ 3 Bedroom (\$575/mo)		___ 4 Bedroom (\$550/mo)	
		** Placement in preferred unit is not guaranteed. Single Occupancy units will have one bedroom locked from use.			

APPLICANTS – Completed by All Occupancy applicants

Do you smoke cannabis? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>Please Note: College property is smoke-free, including housing units & individual rooms.</i>	Alcohol Use <input type="checkbox"/> Non-drinker <input type="checkbox"/> Occasional (1-2 per wk) <input type="checkbox"/> Moderate (1-2 per day) <input type="checkbox"/> Regularly (3+ per day) <i>Please Note: We have a ZERO tolerance policy on alcohol use at the Residence.</i>	Sleep Habits <input type="checkbox"/> Early Bird <input type="checkbox"/> Night Owl <input type="checkbox"/> Average	Cleanliness <input type="checkbox"/> Very Neat <input type="checkbox"/> Tidy <input type="checkbox"/> Untidy <input type="checkbox"/> Messy	Atmosphere Living Space Study Space		Parking Needed? <input type="checkbox"/> YES <input type="checkbox"/> NO Make: _____ Colour: _____ License #: _____
				<input type="checkbox"/> Social	<input type="checkbox"/> Social	
				<input type="checkbox"/> Studious	<input type="checkbox"/> Studious	
				<input type="checkbox"/> Mixed	<input type="checkbox"/> Mixed	

Environmental Sensitivities or Disabilities <input type="checkbox"/> YES <input type="checkbox"/> NO If Yes, a doctor's note is required.	Roommate Preference For the Fall of the 2024 year there will be units available for shared accommodations.	Health Problems or Concerns <input type="checkbox"/> YES <input type="checkbox"/> NO If Yes, please describe: _____ _____ _____
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ALL APPLICANTS ARE REQUIRED TO COMPLETE ATTACHED INCOME DECLARATION/CONSENT FORM

APPLICANT DECLARATION – Completed by ALL applicants – PLEASE READ CAREFULLY

I certify that the information above is true, complete, and correct. I understand this application establishes my priority for assignment to housing if and/or when I am accepted in accordance with the established procedures. If accepted into Residence, I agree to comply with the policies, rules & regulations outlined in the Residence agreement and detailed in the Student Handbook. Upon receipt of a Residence Agreement, I understand that a security deposit of one month's rent (minimum of \$500) is required by the deadline stated on the Residence Agreement to reserve my place.

Payment Options:

- Cash (do not mail)
- Interac (in person)
- Credit Card
- Cheque

Signed _____	Date (d/m/y) _____
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For OFFICE Use Only: Application # _____		
Date Received: _____	Offered _____	Deadline _____
Comments: _____		

TENANT INCOME DECLARATION

Owner/Landlord: **North West College**

Address of Building: **415 7th Avenue West, Meadow Lake, SK S9X 0A3**

Client type: Family Single

Is anyone in your household?

First Nation Metis International Other

List all Members of the Household (including dependents):

Name	Gender	Date of Birth (d/m/y)	Source of Income	Gross Annual Income
Total Household Income				

TENANT DECLARATION & CONSENT

I/We hereby certify and declare that the income stated is my/our total combined annual gross household income from all sources of all non-dependent persons residing in the unit.

I/We hereby grant permission/consent to the disclosure and use of any information provided by me/us in this application to SHC to disclose and use any information provided by me/us for the purpose of determining the landlord's adherence to the operating agreement.

I/We hereby grant permission/consent to the disclosure and use of any information provided by me/us in this application to SHC and/or CMHC for the purpose of conducting program evaluations.

I/We hereby grant permission/consent to the disclosure and use of any information provided by me/us in this application to SHC and/or CMHC for audit purposes.

I/We hereby certify and declare that all the information contained in this declaration is true and complete in every respect.

Tenant Signature

Date (d/m/y)

Tenant Signature

Date (d/m/y)