

Meadow Lake Campus Residence Application 2025-26



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 | | / / |
| | | | | | SK Health # |
| Length of residency at above: | If less than 1 year at above, give previous address: | | | 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: | | <input type="checkbox"/> 1 Bedroom (\$800/mo) | <input type="checkbox"/> 2 Bedroom (\$1075/mo) |
| Program Duration: | | <input type="checkbox"/> 2 Bedroom (\$650/mo) | <input type="checkbox"/> 3 Bedroom (\$850/mo) |
| Academic Year: | | <input type="checkbox"/> 3 Bedroom (\$575/mo) | <input type="checkbox"/> 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

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|--|--|--|--|---|--|
| 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 <input type="checkbox"/> Social <input type="checkbox"/> Social <input type="checkbox"/> Studious <input type="checkbox"/> Studious <input type="checkbox"/> Mixed <input type="checkbox"/> Mixed | Parking Needed? <input type="checkbox"/> YES <input type="checkbox"/> NO Make: _____ Colour: _____ License #: _____ |
|--|--|--|--|---|--|

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|--|--|--|
| 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: _____ _____ _____ |
|--|--|--|

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) _____ |
|--------------|--------------------|

| | | |
|---|---------------|----------------|
| 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 |
|-------------------------------|--------|--------------------------|---------------------|------------------------|
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| | | | | |
| 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)