



Grant Application Form

Project 2 Build/ District of Lake Country and Central Okanagan Foundation:

Date of Application: _____

Applicants Name: _____

Spouse/C0-Applicant: _____

Approximate age of Applicant(s) _____

Number of dependants and ages _____

How long have you lived in the Okanagan ? _____

Have you owned a home in the past? _____

Please give a brief description of your current housing status: _____

Please provide a brief (250 words or less) explanation of why you believe you are the best candidate to receive one of these grants? ...your story:

Should the Selection Committee recommend your application, please have the following information available within 2 days of hearing from the committee:

- 2007 and 2008 Personal Tax Notice of Assessments
- Letter of Employment
- Current paystub

Thank you to all applicants. Please know that each application is read and reviewed. If you are to be chosen by the Selection Committee, they will advise you within the first week post cut-off. As we are only able to select so many each round, we will continue to include certain applications for future rounds. Due to the volume of applications expected, we apologize, but are not able to personally contact any applicants who have not initially been selected.

Signature of Applicant

Signature of Applicant

Signature of Co-signer

NOTE: If co-signer required, co-signer signature must be obtained prior to submitting application for consideration

Applicant Information

Apply with Co-Applicant: Yes No

Borrower - Complete Column 1

E-mail Address:

First Name: MI:

Last Name:

Current Address:

Time at Current Address:

City: State: Zip Code:

County of Current Residence:

Citizenship:

Social Security Number:
(no dashes or spaces)

Date of Birth: (mm/dd/yyyy)

 / /

Daytime Number:

 - -

Evening Number:

 - -

Co-Borrower - Complete Column 2

E-mail Address:

First Name: MI:

Last Name:

Current Address:

Time at Current Address:

City: State: Zip Code:

County of Current Residence:

Citizenship:

Social Security Number:
(no dashes or spaces)

Date of Birth: (mm/dd/yyyy)

 / /

Daytime Number:

 - -

Evening Number:

 - -

Co-Signer - Complete Column 3

E-mail Address:

First Name: MI:

Last Name:

Current Address:

Time at Current Address:

City: State: Zip Code:

County of Current Residence:

Citizenship:

Social Security Number:
(no dashes or spaces)

Date of Birth: (mm/dd/yyyy)

 / /

Daytime Number:

 - -

Evening Number:

 - -

Employment Information

Borrower Complete Column 1

Self Employed: Yes No

Place of Employment:

Employer's Address:

City: State: Zip Code:

Position:

Co-Borrower Complete Column 2

Self Employed: Yes No

Place of Employment:

Employer's Address:

City: State: Zip Code:

Position:

Co-Signer Complete Column 3

Self Employed: Yes No

Place of Employment:

Employer's Address:

City: State: Zip Code:

Position:

Length of time with this employer:

Annual Gross Income:

Length of time with this employer:

Annual Gross Income:

Length of time with this employer:

Annual Gross Income:

Other Annual Gross Income

Amount:

Source:

Amount:

Source:

Amount:

Source:

Marital Status

**Borrower
Complete Column 1**

- Married
- Unmarried
(including single, divorced, widowed)
- Separated

**Co-Borrower
Complete Column 2**

- Married
- Unmarried
(including single, divorced, widowed)
- Separated

**Co-Signer
Complete Column 3**

- Married
- Unmarried
(including single, divorced, widowed)
- Separated

Credit Information

**Borrower
Complete Column 1**

Housing Status:

- Own Rent
- Living With Relative
- Other

Mortgage Holder:

Monthly Mortgage Payment/Rent:

Mortgage Balance:

Current Estimated Property Value:

**Co-Borrower
Complete Column 2**

Housing Status:

- Own Rent
- Living With Relative
- Other

Mortgage Holder:

Monthly Mortgage Payment/Rent:

Mortgage Balance:

Current Estimated Property Value:

**Co-Signer
Complete Column 3**

Housing Status:

- Own Rent
- Living With Relative
- Other

Mortgage Holder:

Monthly Mortgage Payment/Rent:

Mortgage Balance:

Current Estimated Property Value:

Account Where You Have Funds Deposited

Financial Institution:

Balance:

Financial Institution:

Balance:

Financial Institution:

Balance:

Please list any debts you have:

Company 1:

Account #: Balance: Month Pymt:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Company 2:

Account #: Balance: Month Pymt:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Company 3:

Account #: Balance: Month Pymt:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Company 4:

Account #: Balance: Month Pymt:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Company 5:

Account #: Balance: Month Pymt:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Company 1:

Account #: Balance: Month Pymt:

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Company 2:

Account #: Balance: Month Pymt:

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Company 3:

Account #: Balance: Month Pymt:

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Company 4:

Account #: Balance: Month Pymt:

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Company 5:

Account #: Balance: Month Pymt:

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Company 1:

Account #: Balance: Month Pymt:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Company 2:

Account #: Balance: Month Pymt:

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Company 3:

Account #: Balance: Month Pymt:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Company 4:

Account #: Balance: Month Pymt:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Company 5:

Account #: Balance: Month Pymt:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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