

Application for Residence

170 Metcalfe Street, Guelph, ON N1E 4Y3

www.elliottcommunity.org



Thank you for your interest in living at The Elliott Community! Please complete this application form and email to Fiona Miletic, Resident Services Supervisor, to be placed on our Wait List fmiletic@elliottcommunity.org.

Name _____ Date of Birth _____ Phone _____
Address _____ Physician _____
Email _____

What support and/or services do you use in order to maintain your current level of independent living?

When do you foresee yourself moving into The Elliott Community?

Specify the style of suite you're interested in: _____ Specify the Home Area you're interested in: _____
Studio _____ Ellington (Supportive Living)
One Bedroom _____ Nottingham (Assisted Living)

Name of person to be contacted in case you cannot be reached:

Name _____ Relationship _____
Phone _____ Email _____

Every person applying for occupancy within The Elliott Community is required to provide a Medical Certificate completed by his or her personal physician within one month of expected occupancy. This application and Medical Certificate will be subject to review and final acceptance by The Elliott Community's Admission Committee. You will be formally notified of the committee's decision.

Note: Our retirement residences are smoke-free.

Signature

Date

Office Notes: