



QALIPU FIRST NATION – “I’TESNEN: WE ARE STAYING” EMERGENCY HOUSING SUPPORT APPLICATION APPLICATION ELIGIBILITY AND GUIDELINE

Introduction:

“I’tesnen: We Will Stay” Qalipu Emergency Housing Support Program aims to help prevent and reduce homelessness among our members. Existing support(s) include:

- **Emergency Housing Repair** - Provide financial assistance (**maximum \$5,000 per household**) to existing homeowner(s) in need of emergency repair(s) that would **cause the homeowner to leave their home immediately**.
- **Housing Set Up** - Provide housing/rental startup assistance such as first month’s rent and/or last month’s, damage deposit, and/or utilities assistance up to **\$2,000 per application**.
- **Emergency Short Term Accommodations** - Provide hotel placement for a maximum of **ten (10) nights**.

*“Indigenous homelessness refers to Indigenous Peoples who are in the state of having no home due to colonization, trauma and/or whose social, cultural, economic, and political conditions place them in poverty. Having no home includes: those who alternate between shelter and unsheltered, living on the street, couch surfing, using emergency shelters, living in unaffordable, inadequate, substandard and unsafe accommodations or living without the security of tenure; anyone regardless of age, released from facilities (such as hospitals, mental health and addiction treatment centers, prisons, transition houses), fleeing unsafe homes as a result of abuse in all its definitions, and any youth transitioning from all forms of care”- **Reaching Home Indigenous NL***

Program Eligibility:

- Applicant/Co-Applicant must be a registered member of Qalipu First Nation.
- **Applicant must identify as an individual who is currently homeless or at risk of becoming homeless.**
- Applicant/Co-Applicant are required to be a resident of Newfoundland and Labrador.
- Applicant must not be currently supported by the provincial, territorial, or municipal welfare and/or rent supplement programs.
- Based on submission of required documents. Funding is limited.

Please note: *If housing ownership is in the name of a non-member spouse or partner (co-applicant), you may still submit your application with that document; however, it will be necessary to provide further documentation to support that you are a resident of the same household.

**Emergency Short Term Accommodations may be provided to non Qalipu indigenous community members who are homeless and/or at risk of becoming homeless.

Application Process:

- Qalipu application collection will be processed based on submission date and will be processed until funds have been exhausted. **All applications will be reviewed and assessed as they are submitted, based on level of emergency, amount of funding available, in reference to the definition of indigenous homelessness as outlined by Reaching Homes Indigenous NL, and on a first come, first serve basis**
- Limit of one application per household. Duplicate applications will not be reviewed. In the event duplicate applications are received, QFN will consider the first application received as the valid submission.
- All applications require name, accurate mailing address/street address (if different from mailing address), Band registration #, phone number and/or email address, and supporting documentation including proof of home ownership/rental agreement, and proof of combined annual income
- If you have any questions or require support regarding your application, please email: jpark@qalipu.ca or thulan@qalipu.ca
- **FOR ASSISTANCE FILLING OUT YOUR APPLICATION, PLEASE CONTACT: TRAVIS (709) 634-3176 OR JASON (709) 634-0411**



QALIPU FIRST NATION – “I’TESNEN: WE ARE STAYING” EMERGENCY HOUSING SUPPORT APPLICATION

Section 1 – Client Information

Band Registration Number:

0	3	4							
---	---	---	--	--	--	--	--	--	--

Applicant Name: _____
First Last Initial

Address: _____
Street Address/Mailing Address

City/Town Province Postal Code

Phone: _____ **Email:** _____

**If home ownership is not in the same name as the registered band member, co-applicant information is required.*

Co-Applicant Name: _____
First Last Initial

Phone: _____ **Email:** _____

Section 2 – Household Information

Are you currently homeless or at risk of becoming homeless? **YES** **NO**

If yes, please explain

Are you currently on income support? **YES** **NO**

Are you currently in receipt of housing support under Newfoundland and Labrador Housing Corporation? **YES** **NO**

Have you previously been in receipt of housing support funding from any other organization? **YES** **NO** If yes, in what year? _____

Do you own your home? **YES** **NO** How many occupants currently reside in the house? _____

What year was your house built? _____ How long have you lived in the house? _____

What is the combined annual household income? _____ *(Combined income includes ALL occupants above the age of 18)*

Are you currently employed, retired, or attending post-secondary education? **YES** **NO**

Section 2 – Household Information Continued

Are you currently married/common law or single? **Married/common law** **Single**

Do you have any dependents? **YES** **NO**

If yes, how many are currently under your care? _____

Please select what type(s) of emergency housing support you require:

- Emergency Housing Repair**
 - Category 1: Emergency Repairs that would cause the homeowner to leave their home immediately**
 - Category 2: Heating, Electrical, Plumbing**
 - Category 3: Roofing, Structure/Foundation**
- Housing Set Up**
 - Rental/Mortgage**
 - Utilities**
- Emergency Short Term Accommodations**

Please **DESCRIBE** the nature of your current housing situation and the **REASON** for your request for support:

Please attach ALL required supporting documentation to support your application

Are you in need of follow up counselling and/or medical support?

YES **NO**

If yes, please explain _____

Are you in need of support finding long term housing accommodations and/or employment?

YES **NO**

If yes, please explain _____

Section 3 - Declaration

1. I certify that I am a member of Qalipu First Nation
2. I/We declare the above information provided in this application to be complete and true.
3. I/We understand that the information provided in this application is being collected for the purpose of administering Qalipu First Nation Housing Development Programs and is in accordance with Qalipu First Nation client information confidentiality.
4. I/We understand that this application does not constitute an agreement by Qalipu First Nation to provide housing assistance.
5. I/We hereby grant Qalipu First Nation and/or its agents, permission to carry out an inspection of my/our property.
6. I/We authorize Qalipu First Nation to investigate any or all the statements made herein, being fully aware that discovery of any false statements will cancel this application. I/We further agree that such action by Qalipu First Nation will be without penalty or liability for damages.

Before signing, please verify that ALL required supporting documents have been attached:

- Proof of combined household annual income (2021 Tax Assessment)*
- Proof of home ownership and/or rental agreement*
- Photos of repair and maintenance that is required IF applying for emergency housing repair*
- Sales quote of total cost of materials, supplies, and labor IF applying for emergency housing repair*
- Additional information as needed regarding specific support service(s) requested*

If ALL required supporting documentation is not attached with application, then the application may not be reviewed or processed.

Name of Applicant/Co-Applicant

Date

Signature of Applicant/Co-Applicant

Please mail completed application along with all supporting documents to:

**Qalipu First Nation
Housing Division
3 Church Street
Corner Brook, NL A2H 2Z4**

Faxed applications will not be processed, and a mailed copy will be requested