

# City of Lethbridge Subsidy Client Information Form

**This subsidy is based on Household income. Please declare all income from all adults living with you.**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Do you live in Lethbridge? \_\_\_\_\_ How many years have you lived in Canada? \_\_\_\_\_

Are you a student? \_\_\_\_\_ Are you Aboriginal or Metis? \_\_\_\_\_

Have you used this subsidy before? \_\_\_\_\_ Agency name? \_\_\_\_\_

Marital status: **(Please Circle One)** Single Married Separated

Common-law Divorced Widowed NA (Child)

Monthly Net Income: \_\_\_\_\_

How often are you paid? **(Please Circle One)**

Weekly Monthly Every Two Weeks Twice a Month Not Working

Monthly Net income of partner/Spouse: \_\_\_\_\_

How often are he/she paid? **(Please Circle One)**

Weekly Monthly Every Two Weeks Twice a Month Not Working

How many people do you support? \_\_\_\_\_ (including yourself)

Do you receive any other income? (E.g. EI, Pensions, etc.)

\_\_\_\_\_ How much? \_\_\_\_\_

How much rent or mortgage do you pay? (Without utilities) \_\_\_\_\_

Do you have any other expenses? (E.g. Child support, Child care, extra health care,

Medications etc.) \_\_\_\_\_

How much? \_\_\_\_\_

**Expenses must have receipts to be eligible**