

# Co-op Membership Application Form

This form is to be filled in by all applicant(s). Applicant(s) must be 19 years of age or older. All information is treated as confidential and will be used by the Membership / Finance Committee(s) and/or the Board of Directors to determine eligibility for membership in the Co-op.

The Alexander Street Co-op (ASC), like most other Co-ops, has a long waitlist. We cannot provide an estimate, but you should be prepared to wait for ~1-2 years. All applications over 1 year old are removed from the waitlist. If you are still interested after 1 year you must re-apply.

## Applicant Information

Name: \_\_\_\_\_ DoB (m/d/y): \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone #: \_\_\_\_\_

Emergency Contact (*name + phone #*): \_\_\_\_\_

Date of Application (m/d/y) : \_\_\_\_\_

Please also provide a copy of identification; BC Driver's License, Passport etc.

## Current/Past Housing Information

Current Address: \_\_\_\_\_ How long at this location: \_\_\_\_\_

Current Landlord's Name/Phone/Email: \_\_\_\_\_

Why do you want to leave? \_\_\_\_\_

Additional comments about your current housing \_\_\_\_\_

If less than 2 years – how long were you at your previous residence? \_\_\_\_\_

If less than 2 years at your current residence, please provide, landlord(s) name(s), number(s), and email(s)? \_\_\_\_\_

## Current/Past Employment Information

Company Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Gross annual income: \$ \_\_\_\_\_ (*proof of income may be required*)

How long have you been employed there? \_\_\_\_\_ Position: \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Phone #: \_\_\_\_\_

Work References:

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone/Email: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone/Email: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone/Email: \_\_\_\_\_

## Current/Past Volunteer Information

Group Name: \_\_\_\_\_ Phone/Email: \_\_\_\_\_

How long did you volunteer there? \_\_\_\_\_ Position: \_\_\_\_\_

What did you do? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Favorite part? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Least favorite part? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Previous volunteer group ? \_\_\_\_\_ Phone #: \_\_\_\_\_

Volunteer Supervisor References:

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone/Email: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone/Email: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone/Email: \_\_\_\_\_

# Co-op Unit Request Information

Have you lived in a Co-op before ?      No / Yes (which one?) \_\_\_\_\_

Why do you want to move into ASC Co-op? \_\_\_\_\_

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Do you have any skills that would be helpful to the Co-op ? \_\_\_\_\_

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How do you see yourself contributing to fulfill your 4 volunteer hours/month ?

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**Preferred Unit size:** Please note: Only bachelor units are available initially. 1 bedrooms and 2 bedrooms are internal moves.

Bachelor: \_\_\_\_\_ (*1 person per unit*)

1 Bedroom: \_\_\_\_\_ (*1 person no more than 2 per unit*)

2 Bedroom: \_\_\_\_\_ (*2 persons no more than 3 per unit*)

**Bachelor: \$849 (\$1000 buy-in) || 1 Bedroom \$945 (\$1500 buy-in) || 2 Bedroom \$1041 (\$2000 buy-in)**

Name's and ages of all persons who will be living with you:

Name: \_\_\_\_\_ DoB (m/d/y): \_\_\_\_\_

Name: \_\_\_\_\_ DoB (m/d/y): \_\_\_\_\_

Pets are considered with Board of Directors' approval, as per ASC policy established in 2015. All pets must comply with City-bylaws regarding pets, including licensing. **If you are selected for an interview, your dog(s) must be brought along.** If you have a pet(s), please tell us what type(s) (cat, dog etc) and a little about them:

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