

SUPPLEMENTARY FORM
Applicant Information

This form is to be completed by all adult members of your household

Section 1: General Information

Full name of applicant:		
Date of birth:	CRN:	Phone/s:
Current address:		
City:	State:	Postcode:
Current accommodation type: Own Renting Boarding Sharing Other (Please circle)		Weekly payment or rent: \$ How long have you lived at this address? months
Previous address:		
City:	State:	Postcode:
Own Renting Boarding Sharing Other		Weekly payment or rent: \$
How long did you live at this address? months		

Section 2: Your Income Information

What is the total amount of gross income you have received over the past 12 months? \$

Please complete the Applicant Income Questionnaire on the rear of this form

I have attached proof of all these sources of income: Yes No

I understand that the income information provided to NCCH can be supplied to the Federal or State Governments, upon request. in order to establish my eligibility for housing under NCCH's Affordable Housing Programs. Yes No

Section 3: Your Employment Details

Are you currently employed? Yes No <i>If you are not currently employed, circle "No" and go to Section 4</i>
What is your occupation? Current employer:
Employer suburb: When did you commence employment?
Employment conditions : <input type="checkbox"/> Permanent, full time <input type="checkbox"/> Permanent, part-time <input type="checkbox"/> Casual <input type="checkbox"/> Other
Phone: E-mail: Fax:

Section 4: Education and Training

Are you currently engaged in any educational or vocational training courses? Yes No <i>If not, circle "No" and go to Section 5</i>
What is the nature of the education or training you are engaged in?
Education facility: Suburb:
Training conditions : <input type="checkbox"/> Full time <input type="checkbox"/> Part-time
When did this commence? When will this end?

Section 5: Your Background

Are you from an Aboriginal or Torres Strait Islander background? Yes No
Are you a permanent resident of Australia? Yes No What is your country of birth?
What is your first language? Do you require an interpreter? Yes No
Do you have a disability or serious medical condition? Yes No If you answered YES:
a) please describe your disability or condition
b) do you require modifications or features in a dwelling?

Section 6: Declaration

I declare that all information provided on this form are true and correct

Signature of applicant: Date:

Applicant Income Questionnaire

Applicant Name:	Date of income details:	
Income Type	Amount earned over last 12 months	Evidence Required
Gross employment income Including penalty rates, bonuses, fringe benefits (before taxable income). Include income from all employment within past 12 months	\$ <input style="width: 100%;" type="text"/>	Statements from employer(s) for all income received
Reportable superannuation contributions Salary sacrifice contributions and any excess above 9% employer contributions	\$ <input style="width: 100%;" type="text"/>	Statements from employer(s) for all income received
Australian government payments Include all pensions, benefits, allowances, supplementary payments. Include Centrelink rent assistance and family tax benefit	\$ <input style="width: 100%;" type="text"/>	Centrelink statement
Bank interest received	\$ <input style="width: 100%;" type="text"/>	Bank statement
Dividends and shares Include net amount received from public companies or trusts or family trusts or shares held, including both taxable and non-taxable dividend components	\$ <input style="width: 100%;" type="text"/>	Dividend statement or Letter from tax agent/ accountant
Child support income	\$ <input style="width: 100%;" type="text"/>	Letter/statement from Child Support Agency or Bank statement
Income derived from a grant or scholarship	\$ <input style="width: 100%;" type="text"/>	Letter from provider
All foreign income received , including foreign pensions	\$ <input style="width: 100%;" type="text"/>	Payment Notice from supplier
Business Income	\$ <input style="width: 100%;" type="text"/>	Full Profit and Loss Statement from accountant
All other income including any superannuation distribution, income from boarders and lodgers, income from annuities or income streaming products, regular income from all other sources	\$ <input style="width: 100%;" type="text"/>	As requested by NCCH
TOTAL INCOME	\$ <input style="width: 100%;" type="text"/>	
<p>NOTE: All residents over the age of 18 must also provide copies of all bank statements for the past 12 months. NCCH staff will advise each applicants of the applicable dates for the provision of this information.</p>		