Application for Julia Creek Independent Senior Living Units

Please note that completing this application does not guarantee placement.

Applicant 1 Details First Name / Last Name			
Applicant 2 Details First Name / Last Name			
Date of birth:	Applicant 1		Applicant 2
Postal address:			
Residential address:			
Very et europt edducer		[
Years at current address			
Phone:		Mobile:	
Email:			
Household Details	□Live Alone		
	□Share		
	□Live with husband/wife/partner		
	□Other (please describe)		
Do you have any pets?	□Yes		
	□No		
	If yes please provide details. Noting Council have a Seniors Living Pet Policy which restricts pets at the facility.		
Are you currently receiving	\Box Yes \Box No \Box Unsure		
Home Care Package Services?	If yes, please list services currently receiving		

Are you currently receiving	🗆 Yes 🗖 No 📄 Unsure
support through Commonwealth Home Support Programme?	If yes, please list the services you are currently receiving. (e.g. Home Maintenance
Do you live, or have previously lived in McKinlay Shire?	☐ Yes ☐ No Please list dates or number of years:
Do you have family currently residing in McKinlay Shire?	🗆 Yes 🔲 No
Do you have an enduring	□ Yes □ No □ In the process of appointing one.
power of attorney?	If yes, please attach evidence.
Accommodation Sought	□One bedroom
	One bedroom with additional room
	□Two bedroom (note for couples only)
Signature of Applicant:	
Date:	
Privacy collection notice:	McKinlay Shire Council is collecting your name, residential address and phone number in accordance with the <i>Local Government Act 2009</i> in order to process your application. The information will only be accessed by employees and/or Councillors of McKinlay Shire Council for Council business related activities only. Your information will not be given to any other person or agency unless you have given us permission or we are required bylaw.

Please return the completed form to

McKinlay Shire Council 29 Burke St Julia Creek QLD 4823 or via email community@mckinlay.qld.gov.au