



Tenant Selection Application

Boylston Apartments Project

Managed by Community First Guysborough Housing Association (CFGHA)

Community First is a non-profit housing provider serving Guysborough County. It is our goal to offer rental housing that costs 20% below the average market rent for our area. Affordable housing is housing that costs tenants no more than 30% of their before-tax income. Community First also works closely with a network of service providers who can offer wrap around services to help tenants live well in their homes.

Please complete the following application and email to info@community-first.ca.

Section 1: Applicant Information

- Full Name: _____
- Date of Birth: ___ / ___ / _____
- Phone Number: _____
- Email Address: _____
- Current Address:

Street: _____

City/Town: _____ Province: _____ Postal Code: _____

- Preferred Method of Contact: Phone Email Mail

Section 2: Household Information

- Total Number of People in Household: _____

Please list each household member:

Name	Relationship	Age	Gender (Optional)

- Are there any members of the household with disabilities or accessibility needs?

Yes No

If yes, please describe:

Section 3: Housing Need & Current Situation

- **Current Housing Status (check one):**

Homeless

At Risk of Homelessness

Overcrowded Housing

Unaffordable Rent (>30% of income)

Unsafe/Unsuitable Living Conditions

Other (please explain): _____

- **Brief description of current housing situation and reasons for applying:**

Section 4: Income & Employment

- **Primary Source(s) of Income:**

- Employment
- Social Assistance
- Disability Benefits
- Old Age Security/CPP
- Other: _____

- **Monthly Household Income (before tax):** \$ _____

- **Are you currently employed?** Yes No

If yes, Employer Name: _____

Job Title/Position: _____

Section 5: Housing Preferences

- **Preferred Unit Size:**

- 1 Bedroom 2 Bedrooms

- **Do you require any of the following?**

- Wheelchair accessibility
 - Support services (please specify): _____
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Section 6: Priority Consideration

To support equitable access, certain applicants may receive priority. Check any that apply:

- African Nova Scotian or person of African descent applicant
 - Indigenous applicant
 - Person with physical disabilities or intellectual vulnerabilities
 - Senior (65+)
 - Single-parent household
 - Victim of intimate partner or sexualized violence
 - Newcomer to Nova Scotia
 - Guysborough County resident
 - Other vulnerable status (please explain): _____
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Section 7: Consent & Declaration

I declare that the information provided in this application is true and complete to the best of my knowledge. I understand that false statements may disqualify my application.

I authorize Community First Guysborough County Housing Association to:

- Verify information provided
- Contact references or agencies as needed
- Retain this application for the purpose of tenant selection

Signature of Applicant: _____

Date: ___ / ___ / _____ (DD/MM/YYYY)

Supporting Documents Checklist:

Please include copies of the following with your application:

- Proof of income (e.g., pay stub, benefit statement)
- Identification (government-issued ID for all household members)
- Proof of current address or shelter residency (if applicable)
- Letters of reference (optional but encouraged)

Submission Details

Completed applications may be returned to location of pick up or emailed to:

Community First Guysborough County Housing Association

info@community-first.ca

Application Deadline: 4pm March 6th, 2026

Applications will be reviewed by the selection committee. Successful applicants will be invited to meet with committee members for an interview and will be asked to provide a criminal record check and child abuse registry check prior to interview.

Those unsuccessful will receive an email, text or phone notification that they were not successful for this opportunity at this time.