



Hitz Home o 201 Belle Street, P.O. Box 79, Alhambra, IL 62001 o (618) 488-2355

Assisted Living Apartment: Application for Residence

Personal Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment #*

_____ *City* *State* *ZIP Code*

Date of Birth: _____ Social Security #: _____

Medicare # : _____

Marital Status: Married Divorced Single Widowed

Spouse's Name: _____ Spouse's Date of Birth: _____

Spouse's Social Security #:: _____

Emergency Contact Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City* *State* *ZIP Code*

Primary Phone: () _____ Alternate Phone: () _____

Relationship: _____

Nearest Family Member

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City* *State* *ZIP Code*

Primary Phone: () _____ Alternate Phone: () _____

Relationship: _____

Type of Residence Required: Single _____ Double _____

Persons: One _____ Two _____

Do You Own a Car: _____ Make _____ Year _____

Previous Occupation: _____

Special Interests or Hobbies: _____

Religious Affiliation: _____

Do you have any physical limitations? _____

Supplemental Health Insurance Company: _____

Policy #: _____

Resident's Physician: Name: _____

Address: _____

Phone Number: _____

To what hospital should resident be sent to in case of emergency?

Name: _____

Address: _____

Phone Number: _____

Please consider my application for admission to Hitz Home's Assisted Living Community. I understand that final acceptance for an apartment will be made after the initial screening process by the Executive Director and staff of Hitz Home, and the execution of the rental agreement.

Should the applicant not be able to meet the initial screening process to function in the apartment, the one month deposit will be refunded.

Signature: _____

Date: _____

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**A Not-for-Profit Residence Related to Illinois South Conference of the United Church of Christ
by Membership in The Council for Health and Human Service Ministries**