

Vermont Elderly People's Homes Inc

Incorporated under provisions of the
Hospitals and Charities Act and Association Incorporations Act, 1961
Office: 678 Mitcham Road, Vermont VIC 3133

CONFIDENTIAL PRELIMINARY APPLICATION FORM

Prior to acceptance by the Committee, applicants must demonstrate their fitness for independent living, and willingness to abide by the Rules and Regulations set down and/or amended by the Committee of Management.

Remaining in residence depends on applicants' continuing ability to look after themselves and their unit. Additional information may also be attached to this application form as appropriate.

Please forward all complete applications to secretary@veph.org.au

NAME
SEX
CURRENT ADDRESS
EMAIL ADDRESS
CONTACT NUMBER
PLACE OF BIRTH
DATE OF BIRTH
FORMER OCCUPATION

ARE YOU ABLE TO TAKE CARE OF YOURSELF IN THE HOME?

NEXT OF KIN RELATIONSHIP
DETAILS OF ILLNESS OR PHYSICAL DISABILITY

PENSION DETAILS

Please attach current Centrelink Statement confirming details of Pension and Assets

TYPE
PENSION CARD NO. FULL/PART
CURRENT PETS

ASSET DETAILS

PROPERTY \$ CASH SECURITIES \$
OTHER \$

REFERENCES

Two Personal References are required

| | |
|----------------|----------------|
| NAME | NAME |
| CONTACT NUMBER | CONTACT NUMBER |
| ADDRESS | ADDRESS |

Please type your name in full to act as a Signature. Date

Please note that applications are not formally acknowledged, however you will be contacted by telephone to discuss any questions you may have.
When a vacancy occurs, the Committee will contact you and make arrangements for a formal interview.
At that time further details will be required, particularly evidence of health and fitness for independent living.