

**SEND APPLICATION TO:**

UCM @ UBC - GERARD HOUSE  
 2026 Wesbrook Mall, Vancouver, BC V6T 1W3  
 Office: 604.222.0160 | ucmubc@ucmonline.ca

**SESSION APPLYING FOR:**

- SPRING/SUMMER: May 1 – August 31  
 FALL/WINTER: September 1 – April 30

**PERSONAL INFORMATION:**

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Citizenship: \_\_\_\_\_  Male  Female

School (UBC/ Affiliate College): \_\_\_\_\_ Year at UBC: \_\_\_\_\_

Undergrad/ Graduate: \_\_\_\_\_ Year of study: \_\_\_\_\_

Faculty: \_\_\_\_\_ Student Number: \_\_\_\_\_

**ACCOMMODATION REQUEST:**

- Room type requested:  Single Occupancy (\$500/month)  
 Double Occupancy (\$400/month)

**ROOM PREFERENCE:**

Upper level –  east (single)  centre (single)  west (double)

Lower level –  east (single)  west (single)  no preference

Do you have a proposed roommate for the double room? \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

**Note:** Each roommate must submit a separate application form

**SLEEPING AND LIVING HABITS:**

- I am an Early Bird in the morning  I am a Night Owl at night  
 I am quiet in my room  I am loud in my room  
 I prefer it to be quiet around my room  I prefer it to be busy around my room

**PARKING:**

Do you wish to rent a parking space for a vehicle at \$60 per month?  Yes  No

Vehicle make/model: \_\_\_\_\_ Color: \_\_\_\_\_

Plate number: \_\_\_\_\_ Province: \_\_\_\_\_

**IN CASE OF EMERGENCY CONTACT:**

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

**CHARACTER REFERENCES:**

Please provide two character references. One reference should be from your Core Leader or Co-Leader and another from a past room mate, if possible).

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Relationship: \_\_\_\_\_ Duration: \_\_\_\_\_

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Relationship: \_\_\_\_\_ Duration: \_\_\_\_\_

**PASTORAL REFERENCE:**

Please provide a reference from your pastor/minister/priest. (Note: UCM Staff require that you ask them personally before you use them as a reference.

Name of church congregation: \_\_\_\_\_

Pastor's name: \_\_\_\_\_ Duration: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

**APPLICATION QUESTIONS:**

Please download the APPLICATION QUESTIONS document from the website and answer each question fully. Please send in that document with this APPLICATION FORM.

**RULES & COVENANT AGREEMENT:**

Please download and read the RULES & COVENANT AGREEMENT document from the website.

**PLEASE ATTACH:**

- Letter of reference (or an email) from one of your character or pastoral references.

**PLEASE READ AND SIGN:**

I understand that my selection as one of the residents of the Gerard House will be based on my promise to energetically and consistently contribute to the ministry of UCM-UBC, primarily through participation in the community life of the house and yard & building work functions, but also through participation and/or leadership in the Thursday Night gathering, prayer, discipleship, fellowship, or outreach events. The UCM Staff and Point Grey Community Church (the owners of the community house) will support me as a resident and as a member of the UCM-UBC community.

- I have read and agree with the RULES & COVENANT AGREEMENT (separate document).

In submitting and signing this application I declare that the information reported on this form is true, correct and complete, and I authorize verification of information from references or other sources. I acknowledge that this application will become part of the residence agreement when approved and that I have received a copy of the agreement.

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_