



**CLIENT ADMISSION FORM**

**Adult Institutional Care & Adult Family Care Homes**

**PART A: APPLICANT INFORMATION**

1. Applicant's Name: \_\_\_\_\_ 2. Date of Birth: \_\_\_\_\_ 3. IRS# \_\_\_\_\_

(YYYYMMDD)

4.  Canadian Citizen OR  Authority under the Immigration Act to be permanent resident of Canada

5. Applicant is/was residing on-reserve of \_\_\_\_\_ prior to admission. 6. Date of Admission: \_\_\_\_\_  
(Band Name) (mm/dd/yy)

7. Level of care recommended by Continuing Care Assessment Team (check " X " one):

Intermediate Care I (DIAND Type II)  Intermediate Care II (DIAND Type II)  Intermediate Care III (DIAND Type II)

Extended Care (DIAND Type III) - **DIAND is only responsible for costs related to the Client User Charge**

8. Institution/Facility Name or Adult Family Care Home: \_\_\_\_\_ 9. Facility per diem cost \_\_\_\_\_

10. The Applicant's financial assessment, indicates he/she is responsible to pay the Institution / Adult Family Care Home the Client User Charge in the amount of \$ \_\_\_\_\_ per day or as amended, toward the Facility Per Diem of \$ \_\_\_\_\_ or as amended.

**PART B: ADMINISTERING AUTHORITY AUTHORIZATION**

11. The Administering Authority is responsible to pay to the designated Institution on behalf of the client from the day of placement to termination of placement, the portion of the approved Facility per diem cost that exceeds the Client User Charge excluding Extended Care, and, if applicable, the portion of the Client User Charge cost that the client is unable to pay, in accordance with the provisions of the B.C. Regional Social Development Policy Manual.

\_\_\_\_\_ Date \_\_\_\_\_  
Administering Organization Name and # Contact Name Telephone # (YYYYMMDD)

The information you provide in this document is collected under the authority of the First Nations Assisted Living Program for the purpose of providing social support services, based on an assessed need, that meet the social needs of individuals with functional limitations due to age, chronic illness or disability, at a standard that is reasonably comparable to the reference province or territory of residence. Information on individuals is used by Indian and Northern Affairs Canada Assisted Living Program employees who need to know the information in order to respond to your request and/or the program requirements. We do not share the personal information with other government departments. The personal information will be kept for a period of five years. Individuals have the right to the protection of and access to their personal information under the Privacy Act ( <http://laws.justice.gc.ca/en/p-21/255104.html>). The information collected is described under the Treasury Board Personal Information Bank INA PPU 215 which is detailed at [www.infosource.gc.ca](http://www.infosource.gc.ca).