MedStar Good Samaritan Hospital

Senior Housing and Supportive Services

Belvedere Green & Woodbourne Woods

Please note – Smoking is not permitted in our Buildings.

Dear Applicant:

Thank you for your interest in Belvedere Green/Woodbourne Woods.

Below please find instructions for the documents which are a part of this application packet. Please be advised that all forms **MUST** be completed and signed in order for your application to be processed. Incomplete applications will be returned.

Application – Every section (1 through 13) must be completed. Sign and date on the reverse of the application, in the lower right hand corner. Application must be signed.

Physician's Health Report Form – It is necessary that your primary care physician complete this form. <u>Note</u>: <u>Do</u> not submit the remainder of the application while waiting for your physician to complete this form. Hold on to the application and ask your physician to return the completed form to you. Applications received without the completed Physician's Health Report form will be returned.

Applicant Declaration Format – Page 1 must be completed and signed on the bottom if you are a citizen of the United States. If you are NOT a citizen or national of the United States, you must complete the remainder of the form where applicable.

Consumer Report Authorization – Must be signed and dated at the bottom of the page.

Supplement to Application For Federally Assisted Housing – Must be completed, signed and dated if you are authorizing an optional contact person in regards to the various aspects of your application (see Reason for Contact box). If you do not wish to provide the contact information, you must check the box and sign and date the form.

When all forms have been completed AND signed, please return all documents to the following.

    Ms. Pamela J. Oakey
    Administrator
    Senior Housing & Services
    Belvedere Green
    1651 E. Belvedere Avenue
    Baltimore, MD 21239

Thank you.