

The information you provide on this form is collected under the authority of the *Child, Youth and Family Enhancement Act*, and is managed in compliance with the *Freedom of Information and Protection of Privacy Act*. The information will be used to process your application for a licence or renewal of a licence. If you have any questions regarding the collection or use of your personal information, please contact your caseworker.

Application **Application Renewal** (Please return at least 60 days prior to license expiry).

Note:

- Each Facility requires a separate application.
- Applications cannot be processed unless all applicable sections are complete.
- **Please PRINT clearly.**

Section A: Information About Facility			
Name of facility (Please use name under which facility will be operated)			
Address of facility (Complete address including building name and room number, if applicable)			
City / Town	AB	Postal code	Telephone number ()
Legal description of property OR specific building (Optional)			
Facility Mailing Address (if different from above)			Postal code

Section B: Facility Contact Person		
Person in charge at the facility	Position / Title	Telephone number ()

Section C: Information about Licence Holder or Applicants	
Legal name of licence holder (as it appears on licence) or applicant	
Type of applicant (select one only) 01 <input type="checkbox"/> Individual 03 <input type="checkbox"/> Corporation 02 <input type="checkbox"/> Partnership 04 <input type="checkbox"/> Other _____	Type of Licence (select one only) <input type="checkbox"/> Foster Home <input type="checkbox"/> Child and Youth Facility

Section D: Licence Holder Contact Information (Person to whom correspondence should be directed, if different from above)			
Contact name		Position / Title	
Mailing Address			
City / Town	Province	Postal Code	Telephone number ()

Section E: References (complete only for initial application for Child and Youth Facility)			
1	first name	surname	Telephone number ()
	address		Postal Code
2	first name	surname	Telephone number ()
	address		Postal Code
3	first name	surname	Telephone number ()
	address		Postal Code

Section F: Number of Placements
Maximum number of placements in Foster Home/Child and Youth Facility?

Section G: Change in Licence Capacity	<i>Complete Section G For Application Renewals only</i>
Are you requesting a change from present licence capacity? <input type="checkbox"/> Yes <input type="checkbox"/> No	→ If YES, specify numbers and ages requested: Present licence maximum capacity:

Declaration	Name	Position / Title	Telephone number ()
Current address		City / Town	Postal code
Applicant's Signature			date (yyyy/mm/dd)
PRINT name of witness	Witness' Signature		date (yyyy/mm/dd)

Note: An initial and renewal licence will not be issued until all requirements under the *Child, Youth and Family Enhancement Act* including the *Residential Facilities Licensing Regulation* and policy requirements have been met.

PLEASE RETURN AT LEAST 60 DAYS BEFORE LICENCE EXPIRES