

APPLICATION FOR RESIDENCE AT PILGRIM PLACE

Application Fee: \$250 per person

Application form, brief bio, personal statement are required for each prospective resident. Financial information should also be submitted at the time you apply.

Please type or print all parts of the application with dark ink. Any incomplete information could delay the processing of your application.

Name _____
(Preferred title) (Last) (First) (Middle)

Address _____

City, State, Zip _____

Home phone _____ Cell phone _____

E-mail _____

Birth date _____ Birth place _____

Single _____, Married/Partnered _____ Year _____, Divorced _____ Year _____, Widowed _____ Year _____

Year in which you would like to begin residency at Pilgrim Place _____

WORK EXPERIENCE

Applicants submit a one-page resume. For each position served, please state the organization's name and location; position title; a summary of your job responsibilities; employment beginning and ending dates.

VOLUNTEER ACTIVITIES

Applicants submit a one or two-page summary of volunteer activities and causes with which you have been engaged. Please include a brief description of your involvement in each organization.

EDUCATION (Optional)

Dates	School	Location	Degree & Major Field of Study

PERSONAL STATEMENT

This important part of your application provides Pilgrim Place with a more complete picture of your background and interests, as well as your needs and goals for retirement. Please be candid. Please sign and date your statement.

1. What goals and aspirations do you hold for your retirement?
2. What interests you in Pilgrim Place rather than another retirement community?
3. Please tell us about the activities in which you're involved that give you fulfilment and satisfaction?
4. Give specific examples of how your involvement has impacted your neighbors, your workplace and the community in which you reside.
5. Describe your experience(s) (if any) with inclusive, and diverse communities.
6. What else would you like us to know about you?

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ON-CAMPUS VISIT

As part of the application process, an on-campus visit or skype meeting is required including meeting with the Director of Admission and some of the residents of Pilgrim Place.

FINANCIAL INFORMATION

Please complete the Financial Information Form and include it with the application. Approximately one year prior to an applicant's desired year of entrance, applicants will be asked to update the Financial Information Form.

MEDICAL INFORMATION

Between six and twelve months prior to your desired year of entrance, please submit a Medical Information Form completed by your physician. (Supplied on the Pilgrim Place website.)

ADDITIONAL INFORMATION

Are you now or will you in the future be eligible for Social Security? Yes No

Are you now or will you in the future be eligible for Medicare? Yes No

Do you have long term care insurance? Yes No

Do you intend to bring an animal to Pilgrim Place? Yes No

(Applicant Signature)

(Date)

*Certificate of Authority No. 226
RCFE Facility No. 197607628
Skilled Nursing Facility No. 950000084*

(Revised 2018)