Thank you for your interest in Summit Senior Living LLC (SSL). We ask that you please complete this application as the first step to our admission process. The remaining steps include an interview with the prospective resident and/or family representative, assessment of the prospective resident by SSL staff , and completion of the Admission Application Packet. During this admission process it will be determined if the best interest of the resident and SSL would be served by admitting the prospective resident to our facility.

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**Applicant Information**

Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Marital Status: Married \_\_\_\_\_\_\_ Single \_\_\_\_\_\_\_\_ Widowed \_\_\_\_\_\_\_\_

Current Living Arrangements: Single home \_\_\_\_\_\_\_\_ Assisted Living Center \_\_\_\_\_\_

 Nursing/Rehab Facility \_\_\_\_\_\_\_\_\_\_\_

Time of Placement (required) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applicant Financial Information**

Approximate value of Financial Accounts (required) i.e. Cash, Savings, CD’s, stock, bonds, etc.

$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approximate Real Estate Net Worth of Applicant (required) Value of home minus any amount owed:
$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approximate monthly income of applicant (required) investment income, retirement income, social security:

$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does the Applicant have long term care insurance: Yes or No

**Contact Information**

Name (required):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (required):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: (required):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_