

State Employee Workforce Housing Application

MONTANA BOARD OF INVESTMENTS

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Submit Delete

*Applicants for State Employee Workforce Housing must meet qualifying criteria to be eligible. Please answer the question below before proceeding.

Complete applications for qualified employees will be drawn by lottery.

Does the applicant: Have a household income of less than \$110,000 and; spend more than 30% of monthly household income on housing; or is currently unhoused?*

- Yes
- No

Start Form >

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First Name *

First Name is required.

Last Name *

Phone Number *

Email Address *

Letter of Employment with Income (See the BOI website for instructions on how to download from SABHRS) *

Choose File No file chosen

Employee ID (located on paystub) *

Place of Employment *

-- Select an option --

Current Address (if unhoused, use employer's address) *

Address Line 1

Address Line 2

City

-- State --

Zip

Monthly Household Income *

Paystub Upload (for household members not employed by State)

Choose File No file chosen

Annual household income cannot exceed \$110,000. Applicants with an annual household income of more than \$110,000 will not be considered.

\$0.00

Are you currently unhoused or living with family (not paying rent)?*

- Yes
- No

Percentage of income currently going towards rent:

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To the best of my knowledge and belief, the information in this application is true and correct.

I understand that submitting false or misleading information in connection with this application will result in the applicant being found ineligible for the housing program.

Name of Applicant *

Date *

ⓘ Name of Applicant is required.

Before you submit, please note: Once your application is submitted, a confirmation email will be sent. If you do not receive a confirmation email, you will not be entered in the lottery.

SAMPLE