



Rosa Village Co-op

APPLICATION PACKET

Application Period

**Monday, October 5, 2026 to
Monday, October 26, 2026 at 5:00pm**

This is not an application for emergency shelter.

*If you need emergency shelter,
see www.eugene-or.gov/4903/Shelter online.*

Rosa Village Co-op Location:

2275 Roosevelt Blvd., Eugene, Oregon

Important Instructions

How to submit your application

- One application per household. If you have multiple adults in the household, each will need to supply information.
- Please read the *Membership Information* packet first before applying (see <https://rosavillage.org/>).
- All sections of the application must be complete in order to be considered for the lottery or waiting list. Information needed to apply includes:
 - Income documentation
 - Landlord references for *at least* the past 2 years
 - Character references—3 people who know you and are not family members
 - Depending on personal history and circumstances, details may be needed regarding past evictions, current debts, conviction history, and so on.
- Questions? Review the FAQ at <https://rosavillage.org/apply> or email questions to rosavillage@squareonevillages.org or call/text 541-321-8843.
- Completed applications are due by 5pm on Monday, October 26, 2026.

There are 3 different ways to submit your application:

1. Fill out and submit the online form at: <https://rosavillage.org/apply>
2. Return by US mail to SquareOne Villages:

SquareOne Villages, Attn: Rosa Village
272 W. 11th Ave Eugene, OR 97401

Mailed applications must be received by Oct. 26

3. Drop off paper copy in person at the SquareOne Villages main office downtown:

272 W. 11th Ave Eugene, OR 97401

Drop box available in mail slot at the front door.

Note that accessing this drop box requires climbing stairs. If you require assistance, please contact us at (541) 321-8843 to make arrangements for someone to meet you and receive your application.

What happens after applications are submitted?

1. Rosa Village will review each application for completeness and income eligibility.
2. All applications that pass initial screening will be entered into a lottery. After the lottery all applicants will be informed of their lottery position.
3. In lottery order, applicants will have their references contacted (character references and past landlords) and information verified, including conviction history. Background checks will be conducted through a third party verification system, which requires your consent via email to proceed.
4. Applicants who meet the selection criteria and will require a loan from Community LendingWorks to purchase their share should complete a separate application at this time.
5. Applicants who meet the selection criteria will be invited for a required information session, where people can also ask any questions they may have.
6. Each selected applicant will have an opportunity to view the unit being offered. This may happen at the same time as the info session, or may be scheduled separately.
7. Each person will then have up to 2 weeks to review legal documents. Applicants who accept an offer of membership will be contacted by Rosa Village to set a time to sign all relevant documents and finalize their purchase of a share in the co-op, including making a \$500 nonrefundable deposit toward the membership purchase.
8. Once a final inspection has been completed and the housing has been approved for occupancy, Rosa Village will contact future residents to schedule move-in dates. The membership share cost and first month's carrying charges must be paid in full prior to move-in.

Equal Opportunity Housing

Neither SquareOne Villages nor Rosa Village Housing Cooperative shall discriminate on the basis of race, ethnicity, color, religious affiliation, age, sex, gender identity, sexual orientation, familial status, marital status, disabilities, source of income, or for any reasons prohibited by federal law or the laws of the State of Oregon.

Income Eligibility Guidelines

❖ ***Minimum income:** Total household gross income (before taxes) must be at least twice the monthly carrying charges for the unit (see below).

❖ **Maximum income:** Total household gross income (before taxes) must not exceed 60% of the Area Median Income (AMI) for Lane County based on household size.

Minimum Income

<i>Unit Type</i>	<i># of Units</i>	<i>Size</i>	<i>Monthly Carrying Charge</i>	<i>One-Time Share Purchase</i>	<i>Minimum Household Income</i>
Two-Bed Townhome	11	812 sq. ft.	\$850	\$7,500	\$1,700/mo (\$20,400/yr)
Two-Bed Townhome (wheelchair accessible)	1	832 sq. ft.	\$850	\$7,500	\$1,700/mo (\$20,400/yr)
One-Bed Flat +	2	582 sq. ft.	\$725	\$5,000	\$1,450/mo (\$17,400/yr)
One-Bed Flat + (wheelchair accessible)	2	582 sq. ft.	\$725	\$5,000	\$1,450/mo (\$17,400/yr)
One-Bed Flat	36	426 sq. ft.	\$700	\$5,000	\$1,400/mo (\$16,800/yr)

**For Section 8 Voucher Holders, the requirement is 2x your specific tenant-paid rent portion, as determined by the Public Housing Authority (PHA).*

Maximum Income

Household Size	Maximum Monthly Income	Maximum Annual Income
1 person	\$3,445/month	\$41,340/year
2 people	\$3,940/month	\$47,280/year
3 people	\$4,430/month	\$53,160/year
4 people	\$4,920/month	\$59,040/year
5 people	\$5,315/month	\$63,780/year

APPLICATION

Each adult applicant (18 or older) must supply information to be considered for membership. Please fill out the application completely. Incomplete applications will not be considered.

** Indicates required question*

Section 1: CONTACT INFORMATION & HEAD OF HOUSEHOLD

***Legal Name**

<i>first</i>	<i>last</i>

Preferred Name

nickname

Pronouns (check all that apply)

☐ She/Her	☐ He/Him	☐ They/Them
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***Date of Birth**

***Phone #**

***Can this phone # receive texts?**

☐ Yes	☐ No
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***Email** (Note, a valid email address is required to conduct background screening)

***Current Address**

<i>address line 1</i>	<i>address line 2</i>
<i>city</i>	<i>state</i>
	<i>zip code</i>

Mailing Address (if different than current)

<i>address line 1</i>	<i>address line 2</i>
<i>city</i>	<i>state</i>
	<i>zip code</i>

Section 2: ADDITIONAL HOUSEHOLD MEMBERS

(If you are the only person in your household, skip to Section 3)

Note: Children should only be listed for whom you have custody at least 50% of the time.

Household Member #2

Legal Name

first

last

Preferred Name (nickname)

Pronouns (check all that apply)

☐ She/Her ☐ He/Him ☐ They/Them

Date of Birth

Adult or Minor?

☐ Adult ☐ Minor

Relationship

Full-time Student?

☐ Yes ☐ No

Household Member #3

Legal Name

first

last

Preferred Name (nickname)

Pronouns (check all that apply)

☐ She/Her ☐ He/Him ☐ They/Them

Date of Birth

Adult or Minor?

☐ Adult ☐ Minor

Relationship

Full-time Student?

☐ Yes ☐ No

Household Member #4

Legal Name

first

last

Preferred Name (nickname)

Pronouns (check all that apply)

☐ She/Her ☐ He/Him ☐ They/Them

Date of Birth

Adult or Minor?

☐ Adult ☐ Minor

Relationship

Full-time Student?

☐ Yes ☐ No

Household Member #5

Legal Name

first

last

Preferred Name (nickname)

Pronouns (check all that apply)

☐ She/Her ☐ He/Him ☐ They/Them

Date of Birth

Adult or Minor?

☐ Adult ☐ Minor

Relationship

Full-time Student?

☐ Yes ☐ No

Section 3: ADDITIONAL HOUSEHOLD INFORMATION

*Will anyone else who is not listed above live with you in the next 12 months? ☐ Yes ☐ No
If yes, please explain

*Is your household intending to live at Rosa Village as your primary, full-time residence?
☐ Yes ☐ No If no, please explain

*Does any household member own real estate? ☐ Yes ☐ No

If yes, is this a residential property? ☐ Yes ☐ No

Section 4: UNIT TYPE

See the Membership Information packet for floorplans.

*What size/type of unit are you interested in or willing to accept? Please rate your preferred unit types, starting with "1" for your 1st choice, "2" for second choice, etc. If a unit type is not an acceptable option for you, mark that rank "0".

<i>Unit Type</i>	<i>Size</i>	<i>Monthly Carrying Charge</i>	<i>One-Time Share Purchase</i>	<i>Rank</i>
Two-Bedroom Townhome	812 sq. ft.	\$850	\$7,500	
Two-Bedroom Townhome (wheelchair accessible)	832 sq. ft.	\$850	\$7,500	
One-Bedroom Flat + (upstairs only)	582 sq. ft.	\$725	\$5,000	
One-Bedroom Flat + (wheelchair accessible)	582 sq. ft.	\$725	\$5,000	
One-Bedroom Flat	426 sq. ft.	\$700	\$5,000	

Rosa Village has three (3) fully wheelchair-accessible housing units designed for individuals with mobility needs. These units include specialized features such as wheelchair turn spaces, zero-step entries, wider doorways, lower countertops, and roll-in showers.

***Do you or anyone in your household have a disability-related need for a wheelchair-accessible unit?**

☐ Yes ☐ No

***Are you or anyone in your household seeking a reasonable accommodation due to a disability?**

☐ Yes ☐ No *If yes, please explain*

Verification of Accessibility Needs: If you requested a wheelchair-accessible unit, or any other reasonable accommodation (such as a ground-floor unit), Rosa Village reserves the right to request third-party verification of your functional need for the unit's specialized physical features prior to final unit assignment. In accordance with the Fair Housing Act, third-party verification will only be required if the disability-related need for unit features is not obvious or already known to the co-op.

Section 5: PETS

Note: Rosa Village’s pet policy has a limit of two cats and/or dogs total per household. All pets must be vaccinated and licensed per City of Eugene ordinances. Applicants with pets may be required to provide additional information or references. Reasonable accommodations to the pet policy due to a disability may be requested above.

***Do you have any pets?** ☐ Yes ☐ No *If yes, fill out more information below.*

Type List SPECIES: dog, cat, etc.	Service Animal? (includes emotional support animals)	If DOG, is it licensed?
	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No	☐ Yes ☐ No

Is there more to say about your pet(s)?

Section 6: PARKING

*Do you have a vehicle? ☐ Yes ☐ No

If yes, how many and what kind(s)?

Note: Vehicles parked on the property must be licensed, registered, and in working condition at all times.

Reserved parking spaces cost an additional \$25/month. There are 40 spaces (including 2 wheelchair accessible) and 52 units, so not all units will have one and assigned spaces are limited to one per household. If you have a vehicle, and don't get a parking space, on-street parking in the area is very limited.

*Are you seeking a reserved parking spot?

☐ Yes--cannot move in unless this is available ☐ Would prefer if available ☐ No

Are you seeking an ADA parking spot?

☐ Yes--cannot move in unless this is available ☐ Would prefer if available ☐ No

Section 7: HOUSING HISTORY

Current Housing Situation

*Household member name:		
*Check one: ☐ Rent ☐ Own ☐ Other, please explain: _____		
*Street Address:	*City/State	*Zip
*Landlord Name:	*\$ Rent:	
*Phone Contact for Landlord/Reference:	*Dates lived there?	
*Email Contact for Landlord/Reference:		

Previous Housing

List all the places where you or any adult household member have lived in the past **2 years**, not including your current housing listed above. If you lived in a friend's or family member's home, indicate by checking "other." Attach additional pages if necessary.

Prior Housing #1

Household member name:		
Check one: ☐ Rent ☐ Own ☐ Other, please explain: _____		
Street Address:	City/State	Zip
Landlord Name:	\$ Rent:	
Phone Contact for Landlord/Reference:	Dates lived there?	
Email Contact for Landlord/Reference:		

Prior Housing #2

Household member name:		
Check one: ☐ Rent ☐ Own ☐ Other, please explain: _____		
Street Address:	City/State	Zip
Landlord Name:	\$ Rent:	
Phone Contact for Landlord/Reference:	Dates lived there?	
Email Contact for Landlord/Reference:		

Attach additional pages if necessary.

Prior Housing #3

Household member name:		
Check one: ☐ Rent ☐ Own ☐ Other, please explain: _____		
Street Address:	City/State	Zip
Landlord Name:	\$ Rent:	
Phone Contact for Landlord/Reference:	Dates lived there?	
Email Contact for Landlord/Reference:		

***Have you or any adults in your household ever been evicted or named in an open eviction proceeding?**
☐ Yes ☐ No

If yes, please provide the following information:

Household member name(s)	What year?	Location (county & state)

Anything else you want to explain in regard to this:

Use additional sheets if necessary

Section 8: HOUSEHOLD INCOME

***List all sources of income for all household members. Some examples of income sources include, but are not limited, to:**

Employment
Self-Employment
Social Security

Child support or alimony
Disability benefits
Pension/retirement

Unemployment benefits
Workers' Compensation
Investment accounts

Name of Household Member	Source/Type of Income	\$ Amount per Month

***Do you expect any significant changes in household income over the next 12 months?**

☐ Yes ☐ No

If yes, please explain:

***Do you currently have a Section 8 Housing Choice Voucher?**

☐ Yes ☐ No

If yes, please provide the following information:

Current Tenant-Paid Rent:

Voucher Issuing Agency (e.g. Homes for Good)

***Documentation of all income sources must be provided to verify eligibility, please attach to this application.** While each household's financial situation is unique, normally income documentation includes, but is not limited to, copies of key financial documents like your most recent two months of pay stubs; Social Security/SSI/SSDI award letters; W-2 forms; 1099 Forms (reporting miscellaneous income). If you have questions regarding which documents must be provided, visit <https://rosavillage.org/apply> or contact us at rosavillage@squareonevillages.org or (541) 321-8843 (voicemail or text). That same email address can also be used to receive income verification documents if needed.

Section 9: EMPLOYMENT

If you are listing income from Employment, please include the following info.

Household member name:	Employer	Dates of Employment
Position	☐ Full-time ☐ Part-time	Supervisor Name
Employer Phone #	Employer Email	

ADDITIONAL EMPLOYMENT INFORMATION

Household Member Employment #2

Household member name:	Employer	Dates of Employment
Position	☐ Full-time ☐ Part-time	Supervisor Name
Employer Phone #	Employer Email	

Household Member Employment #3

Household member name:	Employer	Dates of Employment
Position	☐ Full-time ☐ Part-time	Supervisor Name
Employer Phone #	Employer Email	

Household Member Employment #4

Household member name:	Employer	Dates of Employment
Position	☐ Full-time ☐ Part-time	Supervisor Name
Employer Phone #	Employer Email	

Section 10: MEMBERSHIP SHARE & FINANCING

To join the cooperative, you must purchase a membership share for the type of unit you are offered:

Unit Type	Membership Share Cost	Max. Loan Amount	Approx. Loan Payment*
1-Bedroom	\$5,000	\$4,000	\$79/month
2-Bedroom	\$7,500	\$6,000	\$119/month

**Monthly payments shown are approximate, and are based on the maximum loan amount.*

A limited amount of financing is available through Community LendingWorks. Loans are available for up to 80% of the membership share cost and are repaid over 5 years at 7% interest.

To qualify for financing, your household's total monthly loan payments (including the new membership share loan), plus the monthly carrying charge for the unit, may not exceed 55% of your net household income.

***How do you plan to pay for your membership share?**

- ☐ I can pay for the full membership share without a loan
- ☐ I will need a loan to help pay for the membership share

If you need a loan, how much would you like to borrow? \$_____

If you need financing, you will need to complete a separate loan application with Community LendingWorks and pay a \$20 loan application fee. **You do not need to apply for the loan at this time.** If your cooperative application is approved and you are offered a unit, you may apply for financing at that time.

Section 11: PARTICIPATION & COOPERATION

Rosa Village's ongoing affordability depends on member participation and cooperation.

Cooperative housing involves additional responsibilities beyond rental housing. Co-op members are not simply tenants, they are **co-owners of their housing**, and partners in a shared business enterprise. In exchange, members can enjoy significant cost savings and greater control over how their housing is managed. By continuing with this application, you agree that:

- **You understand that this is different from rental housing**, and that living at Rosa Village involves collective financial and operational responsibilities that differ significantly from a landlord-tenant relationship. Because members collectively own the property, the financial health and physical upkeep of the property depend on everyone.
- **You understand that Rosa Village is a democratically run community**, and that your household is expected to actively engage in its governance. This includes becoming familiar with the cooperative's decision-making processes; attending the annual meeting where the Board of Directors is elected; and contributing time to manage and maintain the co-op, such as serving on the Board or a committee, landscaping, tidying common rooms, giving tours, and participating in work parties.
- **You agree to participate to the best of your abilities** if accepted as a member of Rosa Village.

Cooperative living requires working closely with your neighbors, both as community members and as business partners. You will be expected to participate in democratic decision-making processes. Co-op business may include deciding how to best maintain common areas; how long members may host guests; or how to budget the co-op's financial resources. This requires a willingness to collaborate, listen to viewpoints different from your own, accept democratic outcomes when a vote does not go your way, and maintain a constructive, respectful attitude during disagreements.

*Participation Commitments	
Can you commit to the requirements outlined above?	☐ Yes ☐ No
Will you be willing to take part in community meetings as described above?	☐ Yes ☐ No
Are you prepared to regularly contribute time and energy to co-op tasks and/or work parties?	☐ Yes ☐ No
Are you willing to listen to people who disagree with you about an issue that concerns you?	☐ Yes ☐ No
If accepted as a member, will you be willing to accept feedback from other members of Rosa Village about concerns involving you or members of your household (example: noise, shared space, lease compliance, etc.)?	☐ Yes ☐ No
Are you interested/willing to serve on the Board of Directors?	☐ Yes ☐ No
Rosa Village is committed to avoiding bias or harassment based on race, color, ethnicity, national origin, age, sex, sexual orientation, gender identity, marital status, family composition, religious affiliation, disabilities, veteran status, or source of income. Do you agree with this commitment?	☐ Yes ☐ No

If you answered No to any of the above questions, please explain:

***What skills would you be able to contribute to the management, maintenance, and upkeep of the Cooperative?**

Section 12: CHARACTER REFERENCES

Please list at least **3 references for each adult** in the household. Choose references who can speak to your teamwork skills, problem-solving abilities, reliability, and initiative in completing projects and working with others. References may include employers, co-workers, volunteer supervisors, teachers, service providers, etc. *Please do not list family members as references.*

**Reference #1*

Reference Name	Reference for which Household Member?	
Reference Phone	Location (town & state)	Years known
Reference Email		
How does this person know you		

**Reference #2*

Reference Name	Reference for which Household Member?	
Reference Phone	Location (town & state)	Years known

Reference Email

How does this person know you

**Reference #3*

Reference Name

Reference for which Household Member?

Reference Phone

Location (town & state)

Years known

Reference Email

How does this person know you

Reference #4

Reference Name

Reference for which Household Member?

Reference Phone

Location (town & state)

Years known

Reference Email

How does this person know you

Section 13: CRIMINAL BACKGROUND INFORMATION

*Have you or any adult member of the household ever been convicted of a criminal offense?	☐ Yes ☐ No
*Do you or any adult member of the household currently have any pending criminal charges?	☐ Yes ☐ No

If yes, state any criminal convictions or pending criminal charges, including which household member name, charges, date, location, and anything else you want us to know (use additional sheets if necessary). Letters of support from counselors, probation officers, etc. may also be included with your application. Letters can also be emailed to rosavillage@squareonevillages.org.

Attach additional pages if necessary.

How did you hear about Rosa Village?

You're almost done! Is there anything not covered so far that you want us to know? (OK to attach additional sheets if needed.)

Information Release and Authorization

PLEASE READ THE FOLLOWING STATEMENT CAREFULLY BEFORE SIGNING THIS APPLICATION

I certify that the information provided in this application is correct and complete, and understand that the Rosa Village Housing Cooperative/Agent may refuse to process or deny my application if it is materially incomplete, or if I intentionally withheld or misrepresented required information. I understand that if any information in this application is later found to be false, it is grounds for termination of membership and occupancy.

I hereby direct and authorize the Rosa Village Housing Cooperative/Agent to make any inquiries you feel necessary to verify the information I have provided and evaluate my eligibility for membership and occupancy by contacting personal and professional references, current and previous housing and landlord references, present or past employers or supervisors, and/or other persons. I authorize the same to give records or information that any such entities may have on my character, general reputation, dates of tenancy, mode of living, financial responsibility, record of attendance, or other information requested.

***ALL members of household 18 years or older must sign this application:**

Signature: _____ Date: _____

Print name: _____

Signature: _____ Date: _____

Print name: _____

Signature: _____ Date: _____

Print name: _____

Signature: _____ Date: _____

Print name: _____