

University Housing



Tenant Information Form

Name: _____

Lease Term (circle one): May-May or August-August Gender: M F

Local Address: _____
Street

City

State

Zip

Home Address: _____
Street

City

State

Zip

Cell/Local Phone: _____ Home Phone: _____

Email Address: _____

Parents' Names: _____

Father: Work Phone: _____ Home Phone: _____

Mother: Work Phone: _____ Home Phone: _____

Do you require accessibility under the Americans with Disabilities Act? Yes No

Do you have a Disability that requires an Emotional Support Animal (ESA)? Yes No

Roommate 1. _____ Email 1. _____

Roommate 2. _____ Email 2. _____

Roommate 3. _____ Email 3. _____

How did you hear about us (Circle One)

Website Facebook Apts.com Google Word of Mouth Referred By: _____

**University Housing will need a copy of your driver's license or passport
before a lease agreement can be signed.**

Date: _____ Signature: _____