University Commons Application

Name: _____

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

Local Address: _____
Street

_____
City State Zip

Home Address: _____
Street

_____
City State Zip

Cell Phone: _____ Email Address: _____

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 ☐

Parents' Names: _____

Father: Cell Phone: _____ Email: _____

Mother: Cell Phone: _____ Email: _____

Roommate 1. _____ Email 1. _____

Roommate 2. _____ Email 2. _____

Roommate 3. _____ Email 3. _____

How did you hear about us (Check One)

Website ☐ Facebook ☐ Aparments.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: _____

EQUAL HOUSING OPPORTUNITY