

University Pointe Apartments

Apartment Application

Apartment Type _____

Expected Move-In Date _____

Name _____ SS# _____

Birth Date ____/____/____ Classification: Fr So Jr Sr Graduate Other _____

Local Phone Number (____) _____ Home Phone Number(____) _____

Permanent Address _____

City _____ State _____ Zip Code _____

In Case of Emergency:

Name _____ Relation _____

Address _____

City _____ State _____ Zip Code _____

Home Phone Number (____) _____ Work Phone Number (____) _____

Parents Information:

Mother's Name _____ Home Phone # (____) _____

Permanent Address _____

City _____ State _____ Zip Code _____

Mother's Employment _____ Position _____

Work Phone # (____) _____

Father's Name _____ Home Phone # (____) _____

Home Address _____

City _____ State _____ Zip Code _____

Father's Employment _____ Position _____

Work Phone # _____

Students Prior Resident:

Address _____

Landlord's Name _____ Phone # (____) _____

Reason for leaving _____

Financial References:

Name of Bank _____

Address _____ Phone # (____) _____

Account # _____ Credit Card # _____

Will you be on Financial Aid or Scholarship? _____yes _____no

If yes, which one(s) and what type? _____

I hereby certify that the foregoing is true and correct. By signing this application form, I hereby authorize the Landlord to check my references as set forth above along with my credit from the Credit Bureau.

Date ____/____/____ Signature _____

____YES _____NO, COPY OF ID