

Pre Rental Application

Applicant Information			
Program Selection: Unassisted Rent: <input type="checkbox"/> Assisted Rent: <input type="checkbox"/>		Race/Ethnicity:	
Name:		Full Time Student: Yes No (Circle one)	
Date of Birth:	SSN:	Phone: ()	
Current Address:			
City:	State:	Zip:	
Own Rent (Circle One)	Monthly Payment of Rent:	How long?	
Previous Address:			
City:	State:	Zip:	
Own Rent (Circle One)	Monthly Payment of Rent:	How long?	
Employment Information / Source of Income			
Current employment or Income source:			
Employer / Source Address:			How long?
Phone: ()	E-mail:	Fax: ()	
City:	State:	Zip Code:	
Position:	Hourly _____	Salary _____	Monthly _____
Credit / Criminal Background			
Have you ever been convicted of a felony? Yes No (Circle one) If yes, when:			
Are you a registered sex offender? Yes No (Circle one) If yes, when:			
Do you have an open or pending bankruptcy? Yes No (Circle one) If yes, when:			
Co-applicant Information			
Program Selection: Unassisted Rent: <input type="checkbox"/> Assisted Rent: <input type="checkbox"/>		Race/Ethnicity:	
Name:		Full Time Student: Yes No (Circle one)	
Date of Birth:	SSN:	Phone: ()	
Current Address:			
City:	State:	Zip:	
Own Rent (Circle One)	Monthly Payment of Rent:	How long?	
Previous Address:			
City:	State:	Zip:	
Own Rent (Circle One)	Monthly Payment of Rent:	How long?	
Co-applicant Employment Information / Source of Income			
Current employment or Income source:			
Employer / Source Address:			How long?
Phone: ()	E-mail:	Fax: ()	
City:	State:	Zip Code:	
Position:	Hourly _____	Salary _____	Monthly _____
Co-applicant Credit / Criminal Background			
Have you ever been convicted of a felony? Yes No (Circle one) If yes, when:			
Are you a registered sex offender? Yes No (Circle one) If yes, when:			
Do you have an open or pending bankruptcy? Yes No (Circle one) If yes, when:			
Other Family Members			
Name:	Social Security Number	Full Time Student Y/N	
I authorize the verification of the information provided on this form as to my credit and employment. I have received a copy of this application.			
Signature of Applicant:		Date:	
Signature of Co-applicant:		Date:	