

Please Supply The Following Information:

FULL NAME (as it appears on U.S. Immigration and Naturalization Service documentation): _____

PLACE OF BIRTH: _____

COUNTRY OR COUNTRIES OF WHICH YOU ARE A CITIZEN: _____

APPROXIMATELY HOW LONG HAVE YOU BEEN IN THE UNITED STATES? YEARS: _____ MONTHS: _____

PERSON IN YOUR HOME COUNTRY WHOM WE MAY CONTACT IN EVENT OF AN EMERGENCY (optional):

Name _____

Relationship _____

Mailing Address _____

Email Address _____

Phone _____

CHECK THE U.S. CITIZENSHIP AND IMMIGRATION SERVICES (U.S.C.I.S.) DOCUMENT THAT ENTITLES YOU TO BE IN THE UNITED STATES:

- Form I-551 Alien Registration Receipt Card or Permanent Resident Card (form includes photo and fingerprint). Expiration date: ____/____/____ Registration number: _____
- Form I-688 Temporary Resident Card (form includes photo and fingerprint). Expiration date: ____/____/____ Registration number: _____
- Form I-688A or I-688B Employment Authorization Card (form includes photo and fingerprint). Expiration date: ____/____/____ Registration number: _____
- Form I-327 Re-entry Permit. Expiration date: ____/____/____ Registration number: _____
- Form I-94 Arrival-Departure Record. Expiration date: ____/____/____ Registration number: _____
- INS receipt for replacement of one of the above documents with verification by INS.

IF YOU ARE RELYING ON FORM I-94, WE WILL ASK TO SEE YOUR PASSPORT WITH VISA STAMP, AND YOU WILL NEED TO ANSWER THE QUESTIONS BELOW:

Country Issuing your passport:	Your passport number: _____	Expiration date: ____/____/____
Do you have a Visa? <input type="checkbox"/> yes <input type="checkbox"/> no	If yes, what type? <input type="checkbox"/> Student <input type="checkbox"/> Work <input type="checkbox"/> Visitor <input type="checkbox"/> Other (specify) _____	Visa expiration date: ____/____/____

IF YOU ARE HERE ON A STUDENT VISA, PLEASE PROVIDE FORM I-20 OR A LETTER OF ACCEPTANCE FROM YOUR EDUCATIONAL INSTITUTION.

Correct Information--Applicant represents that all of the above statements are true and complete. Applicant hereby authorizes Property Staff to contact any references listed above and to obtain consumer reports, which may include criminal background information, about Applicant and any occupants in the apartment in order to verify the above information, references, credit and criminal records. Applicant further authorizes Property Staff to obtain subsequent consumer reports to ensure that Applicant continues to satisfy the terms of the tenancy, for the collection and recovery of any financial obligations relating to Applicant's tenancy, or for any other permissible purpose. Applicant hereby releases from all liability or responsibility all persons and corporations requesting or supplying such information. Applicant acknowledges that false, incomplete or misleading information herein may constitute grounds for rejection of this application, termination of right of occupancy of all occupants under a lease and/or forfeiture of deposits and fees, and may constitute a criminal offense under the laws of this State. This Application is preliminary only and does not obligate Owner or Owner's agent to execute a Lease or to deliver possession of the dwelling unit to Applicant.

Date _____

Applicant Signature _____

Property Staff Initials _____