

**OFFICE OF HOUSING & RESIDENTIAL LIFE
UNIVERSITY TOWERS APPLICATION 2009-2010 (Juniors and Seniors)**

APPLICANT INFORMATION

LAST NAME _____ FIRST NAME _____ MIDDLE INITIAL _____

PERMANENT ADDRESS (# AND STREET) _____

CITY _____ STATE _____ ZIP CODE _____ COUNTRY _____

HOME PHONE # () _____ CELL PHONE # () _____ ARE YOU A TRANSFER STUDENT? YES _____ NO _____

DATE OF BIRTH ____/____/____ OVER 21? YES _____ NO _____ GENDER (CIRCLE ONE) MALE FEMALE

9 DIGIT BANNER ID # (EX: 003 123 456) _____ WSU ACCESS ID # (EX: ab1234) _____ APPLICANT'S PROGRAM OF STUDY _____

EMAIL ADDRESS: _____ (YOU WILL BE CONTACTED REGARDING AVAILABILITY THROUGH EMAIL)

PLEASE INDICATE YOUR CURRENT ADMISSION STATUS: APPLIED TO WSU _____ ADMITTED TO WSU _____

PLEASE INDICATE YOUR CURRENT UNDERGRADUATE ACADEMIC STATUS: JUNIOR _____ SENIOR _____

ARE YOU A WSU ATHLETE? YES _____ NO _____ PLEASE INDICATE WHAT SPORT YOU PLAY: _____

HAVE YOU LIVED IN WSU HOUSING BEFORE? YES _____ NO _____ IF YES, WHERE DID YOU LIVE? _____

DO YOU HAVE ANY MEDICAL CONDITIONS THAT REQUIRES SPECIAL ACCOMODATIONS? YES _____ NO _____

IF YES, PLEASE DESCRIBE: _____

I WOULD LIKE MY HOUSING TO BEGIN: FALL (SEPT) _____ WINTER (JAN) _____ SPRING/SUMMER (MAY) _____

ARE YOU: SINGLE _____ OR MARRIED _____ IF MARRIED, WILL YOUR SPOUSE BE LIVING WITH YOU? YES _____ NO _____

NAME OF SPOUSE: _____ ARE YOU A VETERAN? _____

DO YOU HAVE CHILDREN/DEPENDENTS? YES _____ NO _____ IF YES, WILL THEY BE LIVING WITH YOU? YES _____ NO _____

PLEASE PROVIDE THE NAMES, AGES AND BIRTHDAYS OF YOUR CHILDREN:

1st CHILD'S NAME: _____ AGE: _____ BIRTH DATE: ____/____/____

2nd CHILD'S NAME: _____ AGE: _____ BIRTH DATE: ____/____/____

3rd CHILD'S NAME: _____ AGE: _____ BIRTH DATE: ____/____/____

INTERNATIONAL STUDENTS ONLY

COUNTRY OF ORIGIN: _____ PLEASE PROVIDE THE FOLLOWING INFORMATION FOR A LOCAL CONTACT PERSON:

NAME _____ ADDRESS: _____ PHONE _____

ADDITIONAL MAILING ADDRESS: _____

UNIVERSITY TOWERS APARTMENT SELECTION: PLEASE COMPLETE THIS SECTION

WSU NO LONGER PROVIDES FURNISHED APARTMENTS. IF YOU WOULD LIKE TO RENT FURNITURE, A LOCAL CONTACT IS CORT FURNITURE AT (248)543-3778 OR WWW.CORT1.COM

FOR ROOM LAYOUT PICTURES, PLEASE VISIT: WWW.HOUSING.WAYNE.EDU

ROOM TYPE:	ROOM PRICE:	AMENITIES:	SELECT ONE:
ONE BEDROOM (2 person max)	\$890.00	GAS,ELECTRICITY,WATER,TRASH, CABLE TV AND INTERNET ARE ALL INCLUDED	
TWO BEDROOM (4 person max)	\$1,100.00	GAS,ELECTRICITY,WATER,TRASH, CABLE TV AND INTERNET ARE ALL INCLUDED	
THREE BEDROOM (6 person max)	\$1,350.00	GAS,ELECTRICITY,WATER,TRASH, CABLE TV AND INTERNET ARE ALL INCLUDED	

IMPORTANT INFORMATION

ALL APPLICATIONS MUST BE RETURNED WITH A CHECK OR MONEY ORDER FOR **\$50.00**.

NO CASH OR DEBIT/CREDIT CARDS

(THIS FEE INCLUDES A **\$50.00 NONREFUNDABLE APPLICATION FEE**)

PLEASE MAKE ALL CHECKS OR MONEY ORDERS PAYABLE TO: WAYNE STATE UNIVERSITY

IF SUBMITTING BY MAIL, PLEASE SEND TO: **WSU Housing Office •5221 Gullen Mall Suite # 598 • Detroit, MI• 48202**

- THE APPLICATION FEE DOES NOT GUARANTEE PLACEMENT
- APPLICATION RECEIVED BY JUNE 1,2009 WILL BE GIVEN PRIORITY CONSIDERATION
- APPLICATIONS ARE VALID FOR THE CURRENT ACADEMIC YEAR ONLY.

*****PLEASE NOTE*****

FILING THIS APPLICATION WITH THE WSU HOUSING OFFICE WILL IMMEDIATELY PLACE THE APPLICANT ON A WAITING LIST.

AS SOON AS A VACANCY BECOMES AVAILABLE WITHIN THE BUILDING, THE APPLICANT WILL BE CONTACTED BY THE APARTMENT COORDINATOR BY EMAIL ONLY. IT IS THE APPLICANT'S RESPONSIBILITY TO NOTIFY OUR OFFICE OF ANY EMAIL ADDRESS CHANGES; OTHERWISE INCOMPLETE OR INACCURATE INFORMATION ON THIS FORM OR A FAILURE TO RESPOND AND/OR ACCEPT THE FIRST APARTMENT OFFERED, WILL RESULT IN REVOCATION OF THIS APPLICATION.

Applicant's Signature

Date

Please Print Name