

**APPLICATION FOR OFF-CAMPUS LIVING**  
**Academic Year 2009-2010**

ID#: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_  
(PLEASE PRINT) (PLEASE PRINT)

CLASS YEAR: \_\_\_\_\_ TOTAL # OF ROOMMATES \_\_\_\_\_

CONTACT PHONE #: \_\_\_\_\_

By signing this application, students are indicating their full understanding of the policies regarding off-campus living as outlined on the previous page of this application for off-campus living.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

PROXY NAME: \_\_\_\_\_ PROXY E-MAIL: \_\_\_\_\_  
(IF APPLICABLE – PLEASE PRINT) (IF APPLICABLE)

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Complete this section only if you want to be entered in the lottery as a group under one lottery number. Each student in your group must fill out an individual application. Applications cannot be accepted without complete information.

PROPOSED ROOMMATES:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**DEADLINE FOR ALL APPLICATIONS:**  
**TUESDAY, FEBRUARY 3<sup>RD</sup> AT 4:30 P.M. IN THE STUDENT HOUSING OFFICE**