PACIFIC UNION COLLEGE
COMMUNITY HOUSING APPLICATION

Students 22 years of age or younger are expected to live in the residence halls until approval is granted. Rental/lease agreements should not be finalized until this community housing application is approved. Please refer to the housing policy (www.puc.edu/housing-policy) for more details.

All information must be completed for processing. Please print.

Date: _____   ID: _____   Quarter(s) housing requested: ☐ Fall   ☐ Spring
Academic Year:_____   ☐ Winter   ☐ Summer

Name: _____   E-Mail: _____
      Last   First   Middle

Residence Hall or
Current Address: _____
      Residence Hall or Street   City   State & Zip Code

Cell Phone Number:_____   Home Telephone Number:_____

Birthdate: Mo_____ Day_____ Yr_____   Years at PUC:_____ Year: ☐ FR ☐ SO ☐ JR ☐ SR ☐ Fifth Year or more

Requested
Address:_____
      Street   City   State & Zip Code

Telephone Number:_____   Mailing Address:_____
      PO Box   City   State & Zip Code

REASON APPLYING FOR COMMUNITY HOUSING:
_____
_____

Requested Effective Date:_____

Please check all that apply.

Occupants at Home	**Home**	**Description**	**Privacy**
☐ Live with a Family	☐ Apartment	☐ Kitchen	☐ Private Room
☐ Live Alone	☐ House	☐ Bathroom	☐ Shared Room
☐ Live with Friends	☐ Detached Dwelling	☐ Shared Entrance	☐ Private Entrance

Name of Landlord:_____Relationship (if any):_____
      Last   First

Landlord
Home Address: _____
      Street   City   State & Zip Code

Landlord
Telephone Number:_____

Landlord
Work Telephone Number:_____

Please list all individuals living at requested address:

Name	Age	M / F	PUC Student
_____	_____	M / F	Y / N
_____	_____	M / F	Y / N
_____	_____	M / F	Y / N
_____	_____	M / F	Y / N

Return to: Student Life
Pacific Union College
One Angwin Avenue
Angwin, CA 94508
Fax: 707.965.7386
Email: studentlife@puc.edu

Student Agreement
If this application is approved, I agree to abide by PUC's *Student Handbook* while residing in off-campus housing and I understand that approval of this request may be revoked if questions arise regarding any compliance with College regulations.

_____   _____
Signature   Date

PACIFIC UNION COLLEGE
FINANCIAL & LANDLORD INFORMATION

Student
Name: _____   Date: _____   ID #:_____
    Last   First   Middle

This section is to be completed and stamped by the Student Finance counselor for application processing.

FINANCIAL INFORMATION
(To be completed by Student Finance counselor)

	On Campus Expenses Per Quarter	Off Campus Expenses Per Quarter	
Rent	_____	_____	
Food	_____	_____	
Utilities	_____	_____	
Total	_____	_____	Financial Stamp

_____   _____
Student Finance counselor signature   Date

This section is to be completed by the potential landlord for application processing.

LANDLORD INFORMATION
(To be completed by Landlord)

A Pacific Union College student has applied to rent either a room or apartment from you. Please complete this landlord information section.

Landlord   Landlord
Name:_____   E-Mail:_____
    Last   First

Landlord
Current Address:_____
                      Street   City   State & Zip Code

Landlord   Landlord
Home Telephone Number:_____   Work Telephone Number:_____

RENTAL INFORMATION

Rental Address:_____
                      Street   City   State & Zip Code

☐ Lease ☐ Rent   From _____   To _____   Monthly Rent $_____

LANDLORD AGREEMENT

☐ Yes ☐ No   I will be living fulltime at the same residence with the student applicant during the term of this agreement. I am willing to serve
         in loco parentis which means I will function as a parent/guardian to this student.

☐ Yes ☐ No   I concur that the above financial rental information is correct.

_____   _____
Landlord Signature   Date

07/08/19