Are you currently part and entitled to receive		ttered Site Supported Hi ipend assistance?	ousi				ousing t Informatio	n		
Preference: Check box if it applies		Audio/Visual Accessib	ole	U.S Milit	ary Vete	eran _	Homeless		Handicap Accessible	
Number of bedrooms:		1 Bedroom								
Do you receive a rental sub	sidy that	is not project-based?		Yes No In	f yes, fro	m when	re:			
First Name Middle	Name	Last Name	Bi	rth Date	Social S	Security	#	Drive	r's License #	
A OIL N V I			**	DI.				C II D		
Any Other Names You've	The Past	Past Home Phone						Cell Phone		
All Other Proposed Occupants			Date of Bir			f Birth	th Relationship to Applicant			
Are any proposed occupants students? Check box if it applied below			2S	If so, please lis	st the na	institutio	on in line below			
Part-time		Full-time								
RENTAL HISTORY		Curr	ent]	Residence				Previo	us Residence	
Street Address										
City										
State & Zip										
Last Rent Amount Paid										
Owner/Manager and Phon	e									
Number										
Reason for leaving										
Is/Was rent paid in full?										
Did you give notice?										
Were you asked to move?										
Name(s) in which your util now billed:	ities are									
		From/To					From/To			
Dates of Residency										
SOURCES OF INCOME	Occupant 1			Оссира			ant 2		Occupant 3	
Monthly Gross Pension										
Monthly SSI/SSDI/SSP										
Monthly Public Assistance										
Monthly Unemployment										
Other Income										

EMPLOYMENT HIS	STORY							
Employed By		Current Em	ployment	Previous Employment				
Address								
Employer's Phone								
Name of Supervisor								
Occupation								
Monthly Gross Pay								
Within Gross Fay		From/	/To	From/To				
Dates of Employment		r i Oili/	10		F10III/10			
CREDIT HISTORY								
KEDII HISTOKY		Bank/Institu	ution Name	Balance On Deposit or Balance Owed				
Savings Account		Dank Histic	ution (vame	Danance on Deposit of Dalance Office				
Checking Account								
Credit Card								
Auto Loan								
EFERENCES & EM	IERGENCY CONTAC	CTS						
Name	Personal Reference #1		Personal Reference #2		Nearest Relative Living Elsewhere			
Street Address								
City								
State & Zip Code								
Phone Number								
					ve can't locate you. Furthermore, if you tents of the dwelling on your behalf.			
· ·		s perimission to a	inovi your relative listed above to re	omove un con	terns of the awening on your benuit.			
ENERAL INFORM	ATION			177				
Have you ever been served a late rent notice? Do any pro			osed occupants smoke?		How long do you think you would be renting from us?			
Have you ever filed for I	bankruptcy? If so, when?	When w	vould you be able to move in?	Ha	ve you ever been convicted of a felony			
Have you ever been serv	ed an eviction notice? If so	,when?						
Have you had any recur	ring problems with your c	urrent apartm	ent or landlord? If yes, please	explain:				
Why are you moving fro	om your current address?							
why are you moving ire	om your current address:							
We will run a credit che	ck and a criminal backgro	und check. Is t	there anything negative we will	l find that y	ou want to comment on?			
How did you hear about this apartment?			Do you have an e-mail address where you can be reached?					
Agreement & Auth	orization Signature							
_		hereby author	orize DePaul to run a credit ar	nd/or crimin	al background check and to verify an			
					derstand that any discrepancy or lack			
of information may resu	lt in the rejection of this a	application. I	understand that this is a preli	minary app	lication for an apartment and does n			
					mes available, I must meet the income			
				an la cota caso a				
			uestions regarding rejected ap	prications	must be submitted in writing to DePa			
	es established for each pro Department, 150 Mt. Hope			prications	must be submitted in writing to DePa			

