Student Apartment Tenant Application Lutheran Campus Ministry at Oregon State University

Application for Tenancy beginning (da	te)			
Applicant Name				
Current Address				
City		State	Zip	
Phone	Email			
Enrolled at OSUWOULBCC	Year in School	Major		
Contact in case of emergency		Phone		
Rental or Personal References:				
Name	Relationship			
Address				
City	Email	State	Zip	Phone
		Relationship		
Address				
City				Phone
Policies (Welcome Statement, Interne imbedded in Terms section of agreem • I have read and understand apartme	ent)		nces (found attac	hed or
Rent and Fees				
• I have read and understand rent, fee	es, and monthly pa	yment deadline.	Initial	
Expectations of Tenants • I have read, understand, and am wil	ling to fulfill expec	tations of tenants.	Initial	
By signing below, I authorize Luther I	louse Campus Mir	nistry to contact my	y references.	
Prospective Tenant Signature	Luther House Representative Signature		ve Signature	
Date	Date			