

BISC STUDENT RENTAL APPLICATION FOR MAY LEASE (This is NOT a lease)

Queen's University – Community Housing, 169 University Ave, Kingston, ON, K7L 3N6
community.housing@queensu.ca, fax 613.533.2196



Our University District Rentals include a variety of houses and apartments ranging in size from bachelor to 7 bedrooms.

This application must be filled out by all the students who will be sharing the unit. Details on the allocation process is available on the Community Housing website. Please note, the types of units available vary year-to-year; **THERE IS NO GUARANTEE THAT YOU WILL RECEIVE A HOUSING OFFER. Once all information is complete, please print the document to be signed and dated by all applicants. The form can then be faxed to 613.533.2196 or scanned and emailed to community.housing@queensu.ca**

UNIT TYPE PREFERENCE - Please indicate a first and second choice:

1st choice - APARTMENT HOUSE Bachelor 1 bedroom 2 bedroom 3 bedroom 4 bedroom 5 bedroom 6 bedroom

2nd choice - APARTMENT HOUSE Bachelor 1 bedroom 2 bedroom 3 bedroom 4 bedroom 5 bedroom 6 bedroom

APPLICANT(S) INFORMATION (please print. Please complete two forms where more than 5 applicants) and check here

DESIGNATED GROUP REPRESENTATIVE (the person chosen to represent your group should complete this section)				
1. Last Name	First Name	Middle Name	Date of Birth (MM/DD/YYYY)	Queen's Student #
Queen's Email Address	Other Email Address	Phone Number	Female <input type="checkbox"/>	Male <input type="checkbox"/>
If you have ever lived in Queen's Housing (including residence) please indicate year and location below		Signature	Date (MM/DD/YYYY)	

OTHERS IN GROUP				
2. Last Name	First Name	Middle Name	Date of Birth (MM/DD/YYYY)	Queen's Student #
Queen's Email Address	Other Email Address	Phone Number	Female <input type="checkbox"/>	Male <input type="checkbox"/>
If you have ever lived in Queen's Housing (including residence) please indicate year and location below		Signature	Date (MM/DD/YYYY)	
3. Last Name	First Name	Middle Name	Date of Birth (MM/DD/YYYY)	Queen's Student #
Queen's Email Address	Other Email Address	Phone Number	Female <input type="checkbox"/>	Male <input type="checkbox"/>
If you have ever lived in Queen's Housing (including residence) please indicate year and location below		Signature	Date (MM/DD/YYYY)	
4. Last Name	First Name	Middle Name	Date of Birth (MM/DD/YYYY)	Queen's Student #
Queen's Email Address	Other Email Address	Phone Number	Female <input type="checkbox"/>	Male <input type="checkbox"/>
If you have ever lived in Queen's Housing (including residence) please indicate year and location below		Signature	Date (MM/DD/YYYY)	
5. Last Name	First Name	Middle Name	Date of Birth (MM/DD/YYYY)	Queen's Student #
Queen's Email Address	Other Email Address	Phone Number	Female <input type="checkbox"/>	Male <input type="checkbox"/>
If you have ever lived in Queen's Housing (including residence) please indicate year and location below		Signature	Date (MM/DD/YYYY)	

APPLICANT(S) DECLARATION & AUTHORIZATION

In making this Application, I/We declare that the information reported on this form is true and complete. I/We give permission to Queen's Community Housing to verify my/our student status. I/We understand that if offered a unit based on false or incomplete information, the offer may be rescinded. I/We understand that application does not guarantee I/we will get a unit. I/We also authorize Queen's University to release tenancy history and relevant credit information upon oral or written request from prospective landlords.

PROTECTION OF PRIVACY: The personal information requested on this form is collected and protected under the authority of the *Royal Charter of 1841*, as amended. It will be used to determine and verify your eligibility for rental accommodation and for uses consistent with that purpose. If your application is accepted, this personal information will be used to operate and administer the services provided by Community Housing and for uses consistent with that purpose. Direct questions expressly related to the collection and use of this information to: Associate Director (Community Housing), 169 University Avenue, Kingston, ON, K7L 3N6, 613.533.2501.

Office Use Only Date Received: _____ / _____ / _____ MM DD YYYY	Unit Offered: _____ Date: _____ Deadline to sign Lease: _____	Rev 2018-10-15
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