

UNIVERSITY DISTRICT APPLICATION FOR SUBTENANCY (this is not a lease)

Queen's University – Community Housing, 169 University Kingston, ON, K7L 3N6



-This application is to be used by students who wish to sublet the entire unit from a current tenant visit the Community Housing website for additional information.
 -Only Queen's students in good standing are eligible to sublet University District Rental Units.
-Applicants who are found to be residing in the unit prior to the execution of a valid Sublease may jeopardize their approval.

THIS IS AN APPLICATION TO SUBLET

Unit Address

APPLICANT(S) INFORMATION (please print. Please complete **two forms** where more than 6 applicants) and check here

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
If you have ever lived in Queen's Housing (including residence) please indicate year and location below			Signature	
			Date (MM/DD/YYYY)	

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
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
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
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
If you have ever lived in Queen's Housing (including residence) please indicate year and location below			Signature	
			Date (MM/DD/YYYY)	

6. Last Name	First Name	Middle Name	Date of Birth (MM/DD/YYYY)	Queen's Student #
Queen's Email Address		Other Email Address		Phone Number
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 have read and understand the policies and procedures related to Assignments and Subtenancies as provided on the Queen's Community Housing website. I/We give permission to Queen's Community Housing to verify my/our student status. I/We understand that if approval of my/our application is based on false or incomplete information, the approval and Agreement may be rescinded. I/We understand that application does not guarantee approval and/or allocation to a unit.

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 the Office of the Executive Director, Housing and Ancillary Services, Queen's University.