



When completed, please submit a signed copy to fskrohe@gmail.com.

Rental Application

Student Information

Name: _____

of tenants in group: _____ Address Requested: _____

Current Academic Year: Senior Junior Sophomore Freshman (please check one)

Major/Degree: _____ GPA: _____

Social Security Number (required for credit check): _____

Current Address: _____

Cell Phone Number: _____

Permanent Address: _____

List any club or organization that you are a member of: _____

E-mail address: _____

Do you have a car on campus: Yes or No If yes, License Plate Number and State Registered: _____

Driver's License Number and State: _____

Current Landlord: _____ Amount of Rent: _____

Landlord's Phone Number: _____

Parent Information

(Needed as Parent may be required to co-sign lease agreement)

Parent/Guardian's Name: _____

Parent/Guardian's Address: _____

Parent/Guardian's Phone Numbers:

Home: _____ Work: _____

Cell: _____ E-Mail Address: _____

Parent's Place of Employment: _____ Address of Employer: _____

Emergency Contact: _____ Phone #'s: _____

By signing below, I/we give Landlord, Frank Krohe permission to check my credit bureau, verify the above information, and contact my employer or current landlord to verify information.

Student's Signature: _____ Date: _____