OFFICE USE ONLY
Rec. No. _____
Date Rec. _____
Hall _____
Room

OFFICE OF STUDENT HOUSING
255 S. Dunlap, Suite 120
MEMPHIS, TENNESSEE 38126

RESIDENCE HALL APPLICATION
THE UNIVERSITY OF TENNESSEE
HEALTH SCIENCE CENTER

INSTRUCTIONS: This application must be submitted with a $50.00 advance rent deposit to the Office of Student Housing in order to be processed for assignment.

PLEASE PRINT THE FOLLOWING INFORMATION COMPLETELY AND CORRECTLY.

_____ BIRTHDATE_____
LAST NAME FIRST MIDDLE MALE _____ FEMALE _____

SOCIAL SECURITY NO. _____ TELEPHONE _____

CURRENT ADDRESS _____
STREET CITY STATE ZIP

PERMANENT ADDRESS _____

_____ _____
DATE OF APPLICATION DATE SCHEDULED TO BEGIN CLASSES COURSE OF STUDY

Do you smoke? _____ Yes _____ No

Do you object to a roommate who smokes? _____ Yes _____ No

GOODMAN FAMILY RESIDENCE HALL

(Suite of rooms - 4 bedrooms, 2 bathrooms, living/dining/kitchen combination)

ALL BEDROOMS ARE SINGLE

ONCE OCCUPANCY BEGINS, STUDENTS WHO RECEIVE A ROOM ASSIGNMENT OTHER THAN THE ONE THEY REQUESTED, MAY BE PLACED ON A WAITING LIST FOR ROOM PREFERENCE BY PROVIDING A WRITTEN REQUEST TO THE OFFICE STUDENT HOUSING.

ROOMMATE REQUEST: 1) _____ 2) _____ 3) _____

If you have any physical condition which you feel requires special consideration, please indicate on a separate sheet and attach to this application. In some instances a doctor's statement may be required.

****

Due to limited space, it may not be possible to honor all housing requests. If it is impossible to assign you to your preference, we will make an assignment according to accommodations available.

_____ _____
SIGNATURE DATE