

Application for Residency
Ohio Stater – 2060 N. High St. Columbus, Oh 43201
Phone (614) 294-5381 Fax (614) 294-0278

Date: _____

How did you hear about us?

Apartment Style: (circle room size & length of lease)

Website (Please specify) _____
Advertisement (Please specify) _____
Referral (Please specify) _____
Walked/drove by _____
Other _____

Small, Average Back, Average Front, Large, X-Large

12 installments or 10 installments

Name: _____
(First) (Middle) (Last)

Current College Address _____
(Street) (City, State, Zip)

Cell Number: _____

Present Landlord: (if dorm, put OSU) _____ Landlord Phone: _____

Permanent Home Address: _____

Permanent Home Phone Number: _____

Are you at least 18 years of age? Yes / No

Have you been evicted within the last 5 years? Yes / No If yes, why? _____

School status as of fall move in: FR SO JR SR Grad College Major/Minor _____

Email Address: _____ @ _____

Parental/Co-Signer Information

Parental/Cosigner Names: _____ Cell Number: _____

Parental/Co-signer Address: _____
(Street) (City, State, Zip)

Parental/Co-signer place of employment, work number, position, # of years on job

Parent/Guardian: _____
Place of employment Work Number Position # of years on job

E-Mail: _____

Signature of Co-signer: _____

***Please provide copy of driver's license**

Employment Verification (If applicable (E.g No Cosigner))

Employed by: _____ Address: _____

Position: _____ Phone: _____ Supervisor: _____

Length of Employment: _____ Salary: _____ Annual Income: _____

Previous Employment: _____ Position: _____ Salary: _____

***For Non U.S Citizens only; Ohio Stater will require a copy of your passport and Visa for verification. Passport # _____**

No agreement, either written or oral shall be binding on applicant, agent or owner, unless and to the extent set forth in lease. I/We agree that you may conduct a background check of us. Acceptance of this application does not ensure a room reservation. Space is reserved upon signing a lease agreement by all parties and putting down a security deposit before the property reached full capacity. I/We hereby authorize Ohio Stater to use any consumer reporting agency, credit bureau or other investigative agencies employed by such, to investigate the references herein listed or statements of other data obtained from me/us or any other person pertaining to my/our employment history, credit prior tendencies, character, general reputation, personal characteristics, mode of living, to obtain a consumer report and such other credit information with may result thereby, and to discuss and furnish such information to the owner's agent listed above in support of this application. I/We have been advised that I/We have the right under 606B of the Fair Credit Reporting Act to make a written request, within reasonable rime, for a complete and accurate disclosure of the nature and scope of this investigation. I/We warrant that all the information above is true and correct, and agree to the terms and conditions the I/We have read and understand.

Signature of Applicant: _____

Please provide a copy of applicant's & co-signer's license or passport