



Application for Residence at Armory House Properties

Mail completed application to: Armory House Properties

1010 S. Second St., Champaign, IL 61820

Tel: 217-384-4499 --- Fax: 217-337-8888

Section 1: Student's Information

\$25 non-refundable application fee is required with this application

Last Name	First Name	Middle Name	UIN (Required)
Street Address (Permanent address)			Date of Birth
City/ Province	State	Zip Code	SSN (Required)
Country			Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Student's Email (Most commonly used)			Home Telephone
Name of High School Attended		City/ State	Student's Cell Phone

Section 2: Student's Academic Information

Year in School (for contract period)
<input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Grad Student <input type="checkbox"/> Not Currently Enrolled

College

<input type="checkbox"/> ACES	<input type="checkbox"/> Applied Life Science	Major
<input type="checkbox"/> Aviation	<input type="checkbox"/> Business	Transferred <input type="checkbox"/> No <input type="checkbox"/> Yes
<input type="checkbox"/> Communications	<input type="checkbox"/> Education	Transferred From
<input type="checkbox"/> Engineering	<input type="checkbox"/> Fine & Applied Arts	
<input type="checkbox"/> Liberal Arts & Sciences	<input type="checkbox"/> Nursing	

Section 3: Residential Information

Have you signed a contract card at the University Residence Halls?	<input type="checkbox"/> No <input type="checkbox"/> Yes
Are you a returning resident of AHP?	<input type="checkbox"/> No <input type="checkbox"/> Yes

Please indicate the property for which you are applying:			
Armory House Main	Armory House Suites	Armory House Apartments	Armory House Annexes
<input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Deluxe Double <input type="checkbox"/> Deluxe Single	<input type="checkbox"/> Standard Single <input type="checkbox"/> Corner Single	<input type="checkbox"/> 1 Bedroom <input type="checkbox"/> 2 Bedroom <input type="checkbox"/> 4 Bedroom	<input type="checkbox"/> 1109 Arbor St. Unit: _____ <input type="checkbox"/> 1111 Arbor St. Unit: _____ <input type="checkbox"/> 1113 Arbor St. Unit: _____

How did you hear about us?	<input type="checkbox"/> Web-site <input type="checkbox"/> AHP Mailing <input type="checkbox"/> University Mailing <input type="checkbox"/> Friends
Were you referred by one of our residents? (Please provide their name) <input type="checkbox"/> No <input type="checkbox"/> Yes By: _____	

Roommate/ Suitemate Preferences: (Please list anything which will assist us in matching a suitable roommate/ suitemate.)

Section 4: Parent/ Guardian Information

Father/ Guardian Name			SSN (Required)
Home Address			Home Telephone
City/ Province	State	Zip Code	Cell Phone
Country	Father's Email (Most commonly used)		
Employer		Occupation	

Mother/ Guardian Name			SSN (Required)
Home Address			Home Telephone
City/ Province	State	Zip Code	Cell Phone
Country	Mother's Email (Most commonly used)		
Employer		Occupation	

Section 5: Financial Information

Who should be contacted regarding financial matters?

Name			Relationship
Address (If different than parent/ guardian)			Cell Phone
City/ Province	State	Zip Code	Work Telephone
Country	Email (Most commonly used)		

Financial Aid Information

Are you expecting to receive financial aid? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Anticipated Amount?	\$ _____	Awarded	<input type="checkbox"/> Annually <input type="checkbox"/> Semi- Annually
Would you like to be sent a financial aid addendum? (Special payment plan for those students with financial aid.)			<input type="checkbox"/> No <input type="checkbox"/> Yes

The applicant hereby authorizes Owner/ Owner's Agent to conduct a credit check, which is not limited to obtaining a credit report and interviewing applicant's references and/ or previous landlords. The applicant hereby consents to the credit check process and authorizes any individual listed in this application to speak with Owner/ Owner's Agent regarding applicant's present or previous credit performance. Applicant further releases any and all claims which applicant may have resulting from information provided to Owner/ Owner's Agent. The application also authorizes release of information based upon reliance upon either photocopies or facsimiles of this authorization.