



# Family Student Housing Wait List Application

**PRIMARY CONTRACT HOLDER INFORMATION**

Student ID # \_\_\_\_\_

Applicant: Last Name, \_\_\_\_\_ First Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Email Address (UCSC Preferred) \_\_\_\_\_ Telephone #'s \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ or (\_\_\_\_) \_\_\_\_\_

Mailing Address: Street # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

UCSC College Affiliation: \_\_\_\_\_

Class Standing (Circle one): Freshman    Sophomore    Junior    Senior    Graduate    Post Doc.

**HOUSEHOLD MEMBER #2:** Relation to Primary: \_\_\_\_\_

\_\_\_\_\_  
Last Name, First Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Current or Former UCSC Affiliation: *(circle one)*

Class Standing: Undergraduate    Graduate    Student: SID# \_\_\_\_\_

PostDoc    Staff    Faculty    Non-Affiliated

**HOUSEHOLD MEMBER #3:** Relation to Primary: \_\_\_\_\_

\_\_\_\_\_  
Last Name, First Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Current or Former UCSC Affiliation: *(circle one)*

Class Standing: Undergraduate    Graduate    Student: SID# \_\_\_\_\_

PostDoc    Staff    Faculty    Non-Affiliated

**HOUSEHOLD MEMBER #4:** Relation to Primary: \_\_\_\_\_

\_\_\_\_\_  
Last Name, First Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Current or Former UCSC Affiliation: *(circle one)*

Class Standing: Undergraduate    Graduate    Student: SID# \_\_\_\_\_

PostDoc    Staff    Faculty    Non-Affiliated

**HOUSEHOLD MEMBER #5:**

**Relation to Primary:** \_\_\_\_\_

\_\_\_\_\_  
**Last Name, First Name**

\_\_\_\_\_  
**Date of Birth**

**Current or Former UCSC Affiliation:** *(circle one)*

**Class Standing:** Undergraduate   Graduate   **Student:** **SID#** \_\_\_\_\_

**PostDoc   Staff   Faculty   Non-Affiliated**

**Target Move In Date:** *The first day you can take financial responsibility for an apartment.*

\_\_\_\_\_, \_\_\_\_ 20\_\_\_\_  
**Month   Day   Year**

**Notice Needed:** Please tell us how much notice is needed for you to take financial responsibility of an apartment: **(Circle one):** 30 days   3 weeks   2 weeks   1 week

**\*\*\*PLEASE NOTE\*\*\***

*If you or anyone in your household require disability related accommodations, including use of a Service/Support animal, please contact the Disability Resource Center at [drc@ucsc.edu](mailto:drc@ucsc.edu) for assistance.*

*Did you remember to include **Copies** of:*

- *Photo ID's for everyone over the age of 18 years*
- *Birth Certificates or Proof of pregnancy dated within the last 30 days (if applicable)*
- *A Marriage Certificate or Domestic Partnership Certificate OR*
- *An Affidavit of Adult partnership along with 2 of the required proof of relationship documents as listed on the FSH website at: <https://housing.ucsc.edu/family/application-process.html>*

*Mail application, copies of proof of relationship, and photo ID's to:*  
UCSC Family Student Housing  
599 Koshland Way  
Santa Cruz, CA 95064

X \_\_\_\_\_  
**Applicant's Signature**

**Date:** \_\_\_\_\_

Date Received / Stamp Here

*For office use only*

**NRI:** Yes or No

**Hold:** Yes or No

\_\_\_\_\_  
**Verified In AIS & SHO by**

\_\_\_\_\_  
**Date**

Updated 01/2019

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