

□ Approved

□ Denied

Faculty Housing Rental Application

Return completed form to: jsircy@wlu.edu

Applicant Information:		
Last name:	First name:	Middle name:
Preferred name:		
W&L Employee ID:		
Current Mailing address:	City:	State: Zip:
Phone:	Email:	
	me faculty member at W&L?	
_	e	
		I Single with dependent children Domestic partner
Spouse or partner's name:	·	
Requested date of occupancy: Month	n-Date-Year (required)	
Requested number of bedrooms		
Rent price range: Low \$, Maximum \$	
(W&L strives to rent residential	properties at low market rental rate	s).
Parking ☐ Yes ☐ No (not guarantee	d)	
Pets? Number	Type	
I acknowledge that the information	above is correct to the best of my kno	owledge.
Applicant signature		Date:
discriminate on the basis of race, color, religion, national or eth programs and activities, admissions, and with regard to employ	nic origin, sex, gender identity, gender expression, sexual orienta	applicable non-discrimination laws, Washington and Lee University does not tion, age, disability, veteran's status, or genetic information in its educational rdinator, Elrod Commons 237, (540) 458-4055, kozakl@wlu.edu, who is nder Section 504 and other applicable non-discrimination laws.
	For Office Use Only	······································

Dean's Signature____

______ Date ___