

SECTION I: APPLICANT INFORMATION

HOW DID YOU HEAR ABOUT US: Web Housing Office Sponsor Resident Referral - Name: _____
 Other _____

SENIOR RANKING MILITARY MEMBER'S INFO

Last Name:		First Name, Middle Initial:			Social Security No:		
Address: (previous or home of record)			City:		State:	Zip Code:	Past Installation:
Branch of Service:	Rank/Grade	Date of Rank:	Date of Birth:	Gender:	Dual Military: <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, spouse name/ rank:		
Primary Phone Number:		Secondary Phone:		Military E-Mail:			
Preferred or Spouse E-Mail Address:				Date Housing Needed:		Status of Applicant: <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Single	

SECTION II: HOUSEHOLD DATA (PROOF OF DEPENDENT STATUS AND ELIGIBILITY REQUIRED)

DEPENDENTS RESIDING WITH MILITARY MEMBER:

Last Name	First Name	M.I.	Relationship	Gender	D.O.B.	S.S.N.
				<input type="checkbox"/> M <input type="checkbox"/> F		
				<input type="checkbox"/> M <input type="checkbox"/> F		
				<input type="checkbox"/> M <input type="checkbox"/> F		
				<input type="checkbox"/> M <input type="checkbox"/> F		
				<input type="checkbox"/> M <input type="checkbox"/> F		
				<input type="checkbox"/> M <input type="checkbox"/> F		

Pets (maximum 3 pets)? No Yes If yes, how many? _____
 Type(s)/Breed(s): _____

Special Requests/ Comments: _____

Do you or your dependents require any special accommodations? No Yes: _____
 If yes, please attach details to provide management with additional information regarding your special housing needs.

EMERGENCY CONTACTS

Name:	Address:	City, State, Zip:	Phone:
Name:	Address:	City, State, Zip:	Phone:

APPLICANT SIGNATURE: _____ **DATE:** _____

----- OFFICE USE ONLY -----

Date Application Received:	Date Placed On Waitlist:	Waitlist Placed On (Rank/Bedroom Size):
Date Housing Assigned:	Address Assigned:	Village:
Notes:		Consultant Initials/Date:

You may submit your completed application packet to us by e-mail (thevillagesatbelvoir@themichaelsorg.com) or fax to 703.619.3878. If you have any questions, please contact our office at 703.619.3877.