

College and Wiggins Residence Limited

1236 College Drive

Saskatoon, Sk.Canada S7N 0W4

(306) 715-2619

Application Form

1) Student Information:

First Name: _____ Last Name: _____

Permanent Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Phone Number (home): _____ Cell: _____

University of Saskatchewan e-mail address: _____

Alternate e-mail address: _____

Date of Birth (month/day year): _____ Male

Female

Hospitalization number: _____

Last year I resided at: Contact Name: _____

Address: _____ Phone: _____

College in which you are registered in the coming year: _____

Major/Year of University: _____ U of s student number: _____

2) Parent, Guardian, or next of Kin:

Name: _____ Address: _____

Phone: _____ E-mail address: _____

3) Please list two references: (includes previous landlord)

Name: _____ Relationship: _____

Address: _____ Phone: _____

Name: _____ Relationship: _____

Address: _____ Phone: _____

3) I wish to apply for the following accommodations and parking:

____ \$600 per month, Single room (shared bath)

____ \$850 per month, Double room (shared bath) shared with _____

____ Am requesting residence parking, \$90 per month

Vehicle make/model and license number _____

____ Arrive date _____ Move out date _____

Do you appreciate quiet time for study? YES NO

How did you hear about College and Wiggins Residence?

Have other family members stayed at this location? YES NO

Do you smoke? YES NO

Please list scholarships you are receiving. _____

5) _____ I am aware that College and Wiggins Residence is alcohol/drug/paraphernalia free

and that there is a zero tolerance level with respect to this policy. I am aware that violating this policy can lead to eviction. (Please answer YES in the box)

Signature _____

Date _____