

Rental Application Form
Southwestern Medical Park Apartments

Submit with a check or money order made payable to "Med Park"

The undersigned is applying to occupy a unit in Southwestern Medical Park Apartments (the "Apartments") at The University of Texas Southwestern Medical Center at Dallas (the "University").

Name: _____ (M or F) Total # of occupants: _____

Spouse or roommate: _____ (M or F)

Current Address: _____ City: _____ State/Zip _____

Cell#: _____ - _____ - _____

Move-In Date Requested: ____/____/____ (NO Sundays or Holidays) **Nothing before 6/10 or after 8/1 can be accommodated or guaranteed.**

Your designation with Southwestern is:

Med Student: 1st, 2nd, 3rd, 4th yr. Graduation Date: ____/____

Grad Student - Projected Graduation Date: ____/____

Health Professional Student - Projected Graduation Date: ____/____

MSTP Student: 1st, 2nd, 3rd, 4th, 5th, 6th, 7th, 8th yr. Projected Graduation Date: ____/____

Floor Plan Options:

One Bedroom:

A1 (654 sq. ft.) _____

A2 (656 sq. ft.) _____

A3 (597sq. ft.) _____

-OR-

Two Bedroom:

B1 (1015 sq. ft.) _____

B2 (1,042 sq. ft.) _____

Floor Level Preference: 1stFloor ____ 2nd Floor ____ 3rd Floor ____

Lease Term: All leases expire May 31st. -current leaseholders have the right to extend up to and including 7/19 of current year

Circle the Following:

Do you need a roommate?

Yes No

May we share your email address?

Yes No

Your **Southwestern** email address: _____

Other permanent email address: _____

Office Use Only

Apt.#: _____ Assigned date: _____

Deposit received date: _____

- 1) To apply for housing in the Southwestern Medical Park Apartments you must complete a Rental Application Form and submit your \$25.00 non-refundable application fee to:

Southwestern Medical Park Apartments
Leasing Office
6401 Maple Avenue
Dallas, TX 75235-5505

- 2) Please note: A \$25 Non-refundable application fee is required with the submission of a Rental Application Form in order for your name to be placed on the waiting list for an apartment. Once an apartment has been assigned you will be notified and will have 72 hours to submit a \$150 application deposit and a \$50 administrative fee, or the apartment will be assigned to another applicant. Upon move-in, the application deposit will become your \$150 security deposit. The \$50 administrative fee becomes non-refundable upon move-in. If you cancel your apartment assignment after the aforementioned 72 hour period, you will forfeit the \$150 deposit and \$50 administrative fee.
- 3) To be eligible to reside at Southwestern Medical Park Apartments, a tenant must maintain a current affiliation with the University at all times during occupancy.
- 4) A tenant must file a "Notice to Vacate" form with the University no later than ninety days (90) prior to tenant's anticipated move-out date. A graduating student continuing as a student at the University after graduation must obtain written approval to maintain eligibility to reside at the Apartments.
- 5) A tenant suspended or expelled by the University must complete a "Notice to Vacate" form no later than 24 hours following exhaustion of the appeal process. A tenant who withdraws or resigns from the University as a student or faculty member must also complete a "Notice to Vacate" form and vacate the Apartments within sixty days after withdrawal or resignation.
- 6) Available units are processed on a first-come, first-serve basis after a Rental Application Form and complete deposit has been received. University reserves the right to make changes in housing priorities and procedures as deemed necessary by University. Changes will become effective whenever the appropriate University officers so determine and may apply to both prospective tenants and those tenants already residing at the Apartments.

Contract Guarantor: When Required: If applicant is under the age of eighteen (18) years, or receives 50% or more of his or her financial support from a parent, guardian or other person, then the parent, guardian or other person must also sign and date the Apartment Lease Contract, as a guarantor.

I understand this does not guarantee me a right to lease or to renew a lease, and that the right to lease and reside in Southwestern Medical Park Apartments will be based on the University's housing priorities and apartment unit availability.

X _____
Applicant's Signature

Date Signed: _____

Please PRINT your full name above

With few exceptions, you are entitled on your request to be informed about the information UT Southwestern collects about you. Under Sections 552.021 and 552.023 of the Texas Government Code, you are entitled to receive and review the information. Under Section 559.004 of the Texas Government Code, you are entitled to have UT Southwestern correct information about you that is held by us and that is incorrect, in accordance with the procedures set forth in The University of Texas System Business Procedures Memorandum 32. The information that UT Southwestern collects will be retained and maintained as required by Texas records retention laws (Section 441.180, et. seq. of the Texas Government Code) and rules. Different types of information are kept for different periods of time.

Revised 2/2020

Southwestern Medical Park Apartments

The following notice is provided in accordance with Section 559.003(a) of the Texas Government Code:

1. With few exceptions, you are entitled on your request to be informed about the information The University of Texas Southwestern Medical Center at Dallas collects about you;
2. Under Sections 552.021 and 552.023 of the Texas Government Code, you are entitled to receive and review the information; and
3. Under Section 559.004 of the Texas Government Code, you are entitled to have The University of Texas Southwestern Medical Center at Dallas correct information about you that is held by The University of Texas Southwestern Medical Center at Dallas and that is incorrect, in accordance with the procedures set forth in The University of Texas System Business Procedures Memorandum 32, *Texas Public Information Act*.

The information that The University of Texas Southwestern Medical Center at Dallas collects will be retained and maintained as required by Texas records retention laws (Section 441.180 et seq. of the Texas Government Code) and rules. Different types of information are kept for different periods of time.

Please sign that you have read and understand the application in its entirety .

Signature

Date

This form must accompany the Rental Application.