



West Campus Apartment Application

Office of Housing and Residence Life

Campus Union (CUB), Room 108 | Phone: 575.562.2632 | Fax: 575.562.4321

Student Applicant Information

Name: _____
Last First Middle

Mailing address: _____
Street City State ZIP

Phone: (____) _____ Mobile phone: (____) _____

Email address: _____ Birthdate: _____

Student ID: _____ Gender: Male Female

Contract term requested: Fall 20____-Spring 20____ Fall 20____ only
 Spring 20____ only Summer 20____

Type of lease: Semester lease

Apartment type: 1 bedroom/1 bath (furnished) 1 bedroom/1 bath (unfurnished)
 2 bedroom/1 bath (furnished) 2 bedroom/1 bath (unfurnished)

Monthly rent: \$ _____

Note: This is an application, not a contract. Confirmation of assignment will be made by phone. Assignments are made on a first-come, first-served basis. The University Apartment Contract will be signed at the time of check-in with your apartment manager.

Occupant Information

Name: _____ Relationship to applicant: _____ Age: _____

Name: _____ Relationship to applicant: _____ Age: _____

Name: _____ Relationship to applicant: _____ Age: _____

Name: _____ Relationship to applicant: _____ Age: _____

Emergency Contact Information

Name: _____ Relationship: _____

Daytime phone: _____ Evening phone: _____

Housing Deposit Payment Options

Deposits are due at the time of assignment. You may also request that the deposit be charged to your student account.

Please charge my \$150 deposit to my student account.

Acknowledgement and Signature

I understand my \$150 housing deposit will be refunded only if a written request for cancellation is received by: Aug. 1 for academic year (fall and spring semesters), Jan. 1 for spring only, May 1 for summer session I only, June 1 for summer session II only.

Applicant signature _____ Date _____

Submit application to: Office of Housing and Residence Life
ENMU Station 39
1500 S Ave K
Portales, NM 88130

For Office Use Only

Date received: _____ Initial: _____ Assignment: _____