



BIOLA
UNIVERSITY

Married & Family Housing Application

Return application via email (*grad.housing@biola.edu*), fax (562-906-4567, attention Grad Housing), or in person (Student Services building, front desk).

When do you want to start in Housing? Today's Date ____ / ____ / ____

[] Fall [] Spring of what year? _____ Preferred move in date (if known) ____ / ____ / ____

When I start in Housing, I will be a [] Graduate student [] Undergraduate student (mark one)

Student's Name _____ Sex: M / F
Last First Middle

Biola Student ID (if known) _____ Date of Birth ____ / ____ / ____

Program of Study _____ Admissions Counselor _____

I anticipate graduating: [] Fall [] Spring of what year? _____

Permanent Home City/State _____
City/State Country (if outside USA)

Current Address (if different) _____
Street City/State ZIP

Phone _____ - _____ - _____ Email Address _____

Spouse's Name _____ Biola ID (if also a student) _____

Spouse Date of Birth ____ / ____ / ____ If not yet married, expected date of marriage ____ / ____ / ____

Children/Dependents:

Name Age Name Age

Name Age Name Age

Special Circumstances: (if any)

For office use only: Date Received _____ Received By _____
Eligibility: In THD: Y / N | Enrolled: Y / N | Enrollment Deposit paid: Y / N | Status: Full-Time / Part-Time | Semester Units: _____
Offer: _____ Response Due: _____ Sent Hndbk [] Response & Date: _____
Added GDoc List [] Added Rent Doc [] THD Assigned [] Mark Waitlist [] Added Parking Doc [] Notify Roommates []
C/In Scheduled [] Added C/In GDoc [] C/In Packet [] Paid Deposit []