

Independent Living Program Activity Card

Category: DAILY LIVING

Activity: Complete an Apartment Rental Application

Description:

Get an apartment rental application from a place you would like to live. You will need to complete the applications as if you were presenting it to a prospective landlord. A sample rental application is included for your convenience.

You may choose one of the following: \$6.00 OF dollars for a completed apartment application OR \$4.00 OF dollars for a completed sample application.

Total Dollars Earned:

| |
|----------------|
| \$ |
| (ILP Use Only) |

| |
|--------|
| Notes: |
|--------|

Date: _____

| | |
|--------------------|----------------------------|
| | |
| Youth Signature | Date of Birth |
| Print Name (Youth) | Group Home (If Applicable) |

| |
|----------------|
| Receipt |
| (ILP Use Only) |



Independent Living Program
Take Home Activity

SAMPLE

Complete an Apartment Rental Application

Apartment Applying for: _____ Apt# _____ Move In Date: _____
 Applicant's Name: _____ SS# _____
 Co-Applicant's Name: _____ SS# _____
 Phone # _____ (Optional) DOB Appl: _____ Co-Appl: _____
 Driver's License or ID # Appl: _____ State: _____ Co-Appl: _____ State: _____
 Current Address: _____ City: _____ State: _____ Zip: _____
 (If current address is less than 3 years)
 Previous Address: _____ City: _____ State: _____ Zip: _____

Previous Landlord Information (Not Current Landlord):

Property Name or Property Management Co. _____
 Landlord or Contact Name: _____ Phone # _____
 Landlord Address: _____ City: _____ State: _____ Zip: _____
 Monthly Rental Amount: _____ Resided on premises From: _____ To: _____

Employment Information:

Employer/Company Name: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Supervisor's Name: _____ Phone # _____
 Position: _____ Salary \$ _____ Start Date/Length of Employment: _____

Co-Applicant:

Employer/Company Name: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Supervisor's Name: _____ Phone # _____
 Position: _____ Salary \$ _____ Start Date/Length of Employment: _____

I/We confirm that all the information supplied is true and correct. I/we understand that I/we can be turned down for the apartment if I/we have falsified any information on this application. I/we hereby authorize the verification of all above information by ATS, Inc. including my credit, housing court filings, rental, check writing, employment history including salary, and criminal background.

Applicant's Signature: _____ Date: _____

Co-Applicant's Signature: _____ Date: _____