

Rental Agreement Holder

Date Received \_\_\_\_\_ by \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

UO ID \_\_\_\_\_

Unit Address \_\_\_\_\_

Phone \_\_\_\_\_

UO Email \_\_\_\_\_

Rental Agreement Holder Signature \_\_\_\_\_ Date \_\_\_\_\_

Changes in student or household status must be requested and approved prior to the change occurring. All changes must be in compliance with Family Housing and University Apartments eligibility requirements. All changes must be accompanied by verification of eligibility, such as birth certificates for children, or marriage certificates, or proper documentation of legal domestic partnership. If the change is approved the Rental Agreement holder must sign a new contract with the changes at the Spencer View Area Office.

Requested Changes

Person 1: Request (check one): \_\_\_ Remove \_\_\_ Add Date change will take place \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ UO ID \_\_\_\_\_

Email (UO if student) \_\_\_\_\_ Phone \_\_\_\_\_

Status (check one): \_\_\_ Spouse \_\_\_ Domestic Partner \_\_\_ UO Student \_\_\_ Child:Date of Birth \_\_\_\_\_

Person 2: Request (check one): \_\_\_ Remove \_\_\_ Add Date change will take place \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ UO ID \_\_\_\_\_

Email (UO if student) \_\_\_\_\_ Phone \_\_\_\_\_

Status (check one): \_\_\_ Spouse \_\_\_ Domestic Partner \_\_\_ UO Student \_\_\_ Child:Date of Birth \_\_\_\_\_

Person 3: Request (check one): \_\_\_ Remove \_\_\_ Add Date change will take place \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ UO ID \_\_\_\_\_

Email (UO if student) \_\_\_\_\_ Phone \_\_\_\_\_

Status (check one): \_\_\_ Spouse \_\_\_ Domestic Partner \_\_\_ UO Student \_\_\_ Child:Date of Birth \_\_\_\_\_

Person 4: Request (check one): \_\_\_ Remove \_\_\_ Add Date change will take place \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ UO ID \_\_\_\_\_

Email (UO if student) \_\_\_\_\_ Phone \_\_\_\_\_

Status (check one): \_\_\_ Spouse \_\_\_ Domestic Partner \_\_\_ UO Student \_\_\_ Child:Date of Birth \_\_\_\_\_

Person 5: Request (check one): \_\_\_ Remove \_\_\_ Add Date change will take place \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ UO ID \_\_\_\_\_

Email (UO if student) \_\_\_\_\_ Phone \_\_\_\_\_

Status (check one): \_\_\_ Spouse \_\_\_ Domestic Partner \_\_\_ UO Student \_\_\_ Child:Date of Birth \_\_\_\_\_

Office Use Only

Request Status: \_\_\_ Approved \_\_\_ Denied \_\_\_ Conditionally Approved

Notes \_\_\_\_\_

Staff Initials \_\_\_\_\_

Date \_\_\_\_\_