

## Application for Housing

SPONSOR						
Name:		SSN:		DOB:		
Unit Name:	DOR:	Branch of Service:		Rank:		
Installation Assignment:	Arrival Date:	Duty Phone:		Cell Phone:		
Date of Departure from Losing Installation:	Report NLT Date:	Home Phone:		E-Mail:		
Active Duty Svc Comp Date:		Time Remaining On Active Duty:				
Duty Location (if different):		Marital Status:		Last Assignment:		
Current Address:		Own:	Rent:	Govt:		
Previous Address:		Own:	Rent:	Govt:		
MILITARY SPOUSE (IF APPLICABLE)						
Name:		SSN:		DOB:		
Unit Name:	DOR:	Branch of Service:		Rank:		
Installation Attachment:	Arrival Date:	Duty Phone:		Cell Phone:		
		Home Phone:		E-Mail:		
Duty Location (if different):		Duty Zip Code:		Last Assignment:		
Current Address:		Own:	Rent:	Govt:		
Previous Address:		Own:	Rent:	Govt:		
FAMILY MEMBERS						
First Name, Middle Initial and Last Name:		DOB:	Current Age:	Relationship:		
Date Family Members Will Arrive at Vandenberg:						
VEHICLE						
Make:	Model:	Year:	Color:	Reg. #:	Tag #	State
MISCELLANEOUS						
Do you own a pet? Y - N		Number of Pets?		Type (s):		
Are you in a lease in the local community? Y - N			What is the lease expiration date?			
Have you lived in MFH during this current assignment? Y - N			Dates you lived in MFH:			
Have you or any family member ever been evicted or asked to leave housing? Y - N						
Explanation:						
EMERGENCY CONTACT						
Name:		Address:		Phone Number:		Phone Work:
THE UNDERSIGNED AGREES THAT ALL INFORMATION THAT HAS BEEN PROVIDED IS ACCURATE.						
Signature:				Date:		
Co Signature:				Date:		