

## **Military Application Form**

Michaels Rep. Signature	Arrival Date	Eligibility D	ate	Waitlist Priority
			Key	& Essential Staff?
Waitlist Category	Date & Time Ad	dded	Yes	No

Applicant Information	n						
				Gender			
Name of Service Member [Last, First, M.I.] Current Street Address		Date of Birth City		Male	Female		
				State	Zip Code		
Cell Phone	Home Phone	Work Phone		Social Security			
Civilian Email Address		Government Email Address					
		Marital Statu	IS:				
Pay Grade/Rank Date of Rank Branch of Service		—— Married	Single	Unaccompanied Personne			
Detachment Date Desired Move-In Date		How did you hear about us?					
 Installation/Organization T	 Installation/Organ	nization Trans	ferred To/Milit	ary Unit			

Office Use Only

## Pet Information

Do you have, or plan on getting, pets?\* Yes No

\*If yes, a pet deposit of \$250 per pet is required, up to 2 pets. See Pet Policy for breed restrictions.

Name	Туре	Age	Color	Breed	Weight



'ear	Make		Model	Co	lor		License Plate N	lumber	State
lear	Make		Model	Cc	Color		License Plate Numbe		State
Depende	ent Information								
Spouse									
Name [La	st, First, M.I.]	Phone	Email			Gender	Date of Birth	Social S	Security Numb
Dual Milita	ry? Yes No	Bran	ch of Service:		Reser	ves? Y	es No		
Rank:	Dated	of Rank:		EMFP N	lember? Ye	es	No		
	Date o	of Rank:		EMFP N					
Other Dep	endents Residing wi	th Service Me	ember						
	0		1						

## Emergency Contact Information

Name [Last, First, M.I.]	Relationship	Phone	Address

By signing this application, it is confirmed that all of the information contained in this application is true and correct to the best of the applicant's knowledge. The applicant understands and agrees that if it is later discovered that the applicant falsified any information in this application, it could result in termination of the application's tenancy.

Service Member(s) Signature

Date

Email the completed application and all required documents on the Military Eligibility Form to: villagesatirwin@tmo.com

