

LAFAYETTE COLLEGE

Business Services Office

Return completed form to: rentals@lafayette.edu

INDICATION OF INTEREST IN COLLEGE OWNED HOUSING

Name				
Contact Information				
E-mail				
Address				
Phone Number				
College Department				
Move-in Date				
Monthly Budget				
Rental Type Desired	House		Apartment	
# of Rooms	Bedrooms		Baths	
# of Occupants				
Type and # of Pets				
Comments				