

Truman State University – Residence Life Request for Family Housing

Complete the form and return to: **Truman State University**
Office of Admission
100 E Normal
Kirksville, MO 63501

In addition to the form, please send the required documents and the \$150 housing application fee/deposit.

Truman ID _____ Name _____
Last First MI

Address _____

City, State, Zip _____

Phone _____ E-Mail _____

Name of Spouse: _____

Name(s) of All Dependent Children Living With You: _____

Entry Status First Year Housing Start Date Fall
 Transfer Spring _____
Year

Reason for Request

_____ Residing with spouse (Must provide notarized copy of marriage certificate)
_____ Residing with dependent child (Must provide notarized copy of birth certificate)

Signature of Student _____ Date _____

Office Use Only

Date Received _____ Approved By _____ Residence Hall Placement _____