

# **Decatur Christian Towers**

## **Application for Residency**

Please answer all questions on this application. Enter “None” or “N/A” for those questions which do not apply to you or which you choose not to answer. Print or type, and complete the application in ink.

**Applications will not be considered unless they are fully completed.**

**Please provide a copy of a driver’s license or a state identification card when you submit an application.**

For financial information, please provide the names and addresses of people who can verify the information you provide. (For example, for employment income, write your employer’s address; for a medical expense, write the address of your doctor). Please attach pages to record additional information if there is not enough space for an entry on the application.

Before we offer you a unit, we will give you a CONSENT FORM (“Authorization for Release of Information”); this form allows us to verify the information you provide on your application. Each adult family member must sign the Application and the Consent Form. Until you sign the Consent Form, we cannot offer you a unit.

**Please schedule appointments with the Admissions Director if you would like to tour the building. There is not always someone available to leave the office area, emergency board, and phone unless prior arrangements have been made.**