CENTRAL CONSOLIDATED SCHOOL DISTRICT #22 REQUEST FOR STAFF HOUSING EMAIL completed form to: nelsst@centralschools.org



<u>DISTRICT:</u> The School Board of Central Consolidated School District

<u>TENANT:</u> School employee renting school housing. Certified Teaching Staff will be given first priority

How many bedrooms requested?

Main Lease Holder				
NAME/S	WORK SITE/POSITION			

The above-named persons shall be jointly and severally liable under this Agreement and may be collectively referred to as "Tenant" herein. Back ground checks will be conducted for individuals applying to rent school housing and any individuals 18 years or older who will be living with the tenant.

Other immediate family members living on the leased premises:							
NAME: LAST	FIRST		Work Site (If	applicable)/Position	Relationship/Age		

Vehicle Information				
Make/Model/Color:		License Plate#		
Make/Model/Color:		License Plate#		
Make/Model/Color:		License Plate#		

Pet Information - Describe the pet that will occupy the rental unit. Example: breed, size, color, etc. THREE PET LIMIT

Cat/dog			Description: nd copy submitted?	Yes No	-	
Cat/dog			Description:	Yes No	-	
Cat/dog	□ Inside	Outside	Description:		-	
	Are all vaccinat	tions current a	nd copy submitted?	Yes 🗌 No		
	A monthly fee	e of \$35.00 pe	r month will be charged	I. All pets must be kept c	aged, fenced or leashed.	
Central Consolidated School District hereby leases to the tenant Unit #						
located			("Pre	mises") to used as a priv	ate dwelling and not otherwise, by the	
Tenant, tl	heir guest or in	vitees for a te	erm to commence at the	e premises unless soone	r terminated as hereinafter provided.	
Expected	occupancy da	ite:		Email:		
Lessee:		Print Name		Date:		
Lessee:				Phone #		
		Signature			Revised 8/31/17	