



CRESCENDO SHARED LIVING

Tenant Application – Shared Room Housing

Property Location: _____

Room Type: Shared Room Private Room

Desired Move-In Date: _____

APPLICANT INFORMATION

Full Legal Name: _____

Preferred Name: _____

Date of Birth: _____

Social Security Number (last 4 digits only): _____

Phone Number: _____

Email Address: _____

Current Address:

City: _____ State: _____ Zip: _____ How

How long have you lived at this address? _____

EMPLOYMENT & INCOME INFORMATION

Current Employment Status:

- Employed Full-Time Employed Part-Time Self-Employed Unemployed
 Retired Disability Veteran Benefits Other: _____

Employer / Income Source: _____

Monthly Income (approx.): \$ _____

Length of Employment / Income Source: _____

- Proof of income available (pay stub, benefits letter, bank statement)

RENTAL HISTORY

Previous Address:

Landlord/Property Manager Name: _____

Phone Number: _____

Reason for Leaving: _____

- I have no prior rental history

SHARED LIVING COMPATIBILITY

(This helps us create a safe and harmonious home for everyone)

1. Have you lived in shared housing before?

Yes No

2. Describe your daily schedule (work hours, sleep times, etc.):

3. Do you smoke? Yes No

4. Do you drink alcohol? Yes No

5. Do you use recreational substances? Yes No
(Honesty matters — this is about compatibility, not judgment.)

6. Are you comfortable with quiet hours and shared responsibilities?
 Yes No

7. Do you have any pets? Yes No
If yes, describe: _____

WELLNESS & COMMUNITY AGREEMENT

Crescendo Shared Living promotes:

- Respectful communication
- Clean shared spaces
- Non-violent conflict resolution
- Personal accountability
- Community wellness and stability

Do you agree to uphold these values?

Yes No

BACKGROUND & SAFETY (CONFIDENTIAL)

Have you ever been convicted of a violent felony?

Yes No

(A "yes" does not automatically disqualify you. We review on a case-by-case basis.)

If yes, please explain briefly:

EMERGENCY CONTACT

Name: _____

Relationship: _____

Phone Number: _____

APPLICATION FEE & ACKNOWLEDGEMENT

Application Fee (if applicable): \$ _____

Paid Waived

I certify that the information provided is true and complete to the best of my knowledge. I understand that false information may result in denial of housing.

I authorize Crescendo Shared Living to verify information provided, including rental and

employment references.

Applicant Signature: _____

Date: _____

FOR OFFICE USE ONLY

Application Received: _____

Approved Denied Pending

Move-In Date: _____

Notes: _____