

THIS SPACE FOR OFFICE USE ONLY		<input checked="" type="checkbox"/> (68 <sup>th</sup> St.) East Campus
BLDG: <u>ANNEX RESIDENCE</u>	RENT: _____	MOVE-IN DATE: _____
ROOM #: _____	SECURITY DEPOSIT: _____	MOVE-OUT DATE: _____

**New York-Presbyterian**  
**TEMPORARY ANNEX HOUSING APPLICATION**  
523 EAST 70<sup>TH</sup> STREET, 9<sup>TH</sup> FLOOR, NEW YORK, NY 10021

**PLEASE RETURN APPLICATION TO: NYP Real Estate, 405 E. 71<sup>st</sup> Street, 1st Floor  
New York, NY 10021 212.746.9096 (Email: nyphousing@nyp.org)**

**HOW DID YOU LEARN ABOUT NYP HOUSING?**

(REQUIRED: PLEASE CHECK ONE)

- Human Resources     Infonet     RE Website     RE Posters     Other (write below)  
 Resident Referral     Dept. Referral     Video     NYP Press    \_\_\_\_\_

**IMPORTANT: PLEASE PRINT CLEARLY**

**PERSONAL DATA:**

Name: _____	Employment Date: _____
Address: _____	Today's Date: _____
Employee Number: _____	Home Tel.#: _____
	Cell Phone #: _____
	Email Address: _____

**EMPLOYMENT DATA:**

Position: <u>Neurosurgery Fellow</u>	Department: <u>Neurological Surgery</u>
If House Staff list PGY: _____	Chairman/Supervisor: <u>Antonio Bernardo M.D.</u>
Status: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	NYP Tel. #: <u>( 212 ) 746-1468</u>
Work Email Address: <u>CWID Pending</u>	Beeper #: <u>(     )</u>
Employer: <input type="checkbox"/> NYP-East Campus <input type="checkbox"/> NYP-West Campus <input type="checkbox"/> Columbia University <input checked="" type="checkbox"/> Cornell University	
Employment Verification: <input checked="" type="checkbox"/> New Hire Offer Letter <input type="checkbox"/> Hospital Identification Card	

**APARTMENT DATA:**

**APARTMENT TO BE SHARED WITH:**

**NO ONE**

**APPLICATION FOR:**

**DORMITORY**

I CERTIFY THAT ALL OF THE INFORMATION IS TRUE AND COMPLETE. THIS APPLICATION MUST BE UPDATED ANNUALLY. FAILURE ON MY PART TO DO SO WILL RESULT IN REMOVAL OF MY APPLICATION FROM THE WAIT LIST. I UNDERSTAND THAT, IF AFTER VIEWING AND DECLINING AVAILABLE ROOM, I WISH TO REMAIN ON THE WAIT LIST, MY NAME WILL BE MOVED TO THE BOTTOM OF THE WAIT LIST.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_  
DATE OF EXPECTED OCCUPANCY: \_\_\_\_\_