

Visiting Student Housing Request

Students from outside the U.S.A. who are applying for Mount Sinai electives/rotations return this form to: Office for Student Affairs,
Mount Sinai Medical Center, Box 1257
One Gustave L. Levy Place 10029-6574
New York, NY 10029-6574
(212) 241-6691
(212) 369-6013 (Fax)

Students from the U.S.A. must return this application with a certified check or money order payable to Mount MSMC Residential Realty LLC, for \$900.00. This will be applied to your housing fee. It is **NOT REFUNDABLE unless you cancel** with at least two week's advance written notice. Mail this application to Real Estate Division, 1249 Park Ave., New York, NY 10029,USA.
(212) 831-3093 fax
(212) 410-0307 phone

This application must be accompanied by a letter from a sponsoring Mount Sinai office or department.

Family Name _____ Name _____ Male _____
Today's Date: _____ Female _____
(Month/day/year) _____
Date you start your study: _____ telephone number where we can leave a message _____
(Month/day/year) _____
U.S. Social Security or _____ Fax number _____
Immigration visa number _____ email _____
Mount Sinai Department: _____
(please be specific) _____
Your permanent address: _____

Note: your accommodations would have furniture but NOT sheets, pillows, towels, blankets, kitchen utensils, bathroom supplies, telephone, television, nor radio. Damages to the unit upon vacating will subject to additional charge.

Date Housing is Needed: From: _____ To: _____
Month/day/year Month/day/year

Please note that Smoking is NOT permitted

Rental price: \$900 per month _____

NOTE: Please call the Real Estate office one month prior to your expected arrival to confirm whether or not you have been assigned Mount Sinai housing. If we don't hear from you, any pending housing assignment may be cancelled. Housing fee subject to change with out notice.

G:share/APalme/visStu/els