



Upstate Area Health Education Center (AHEC) Housing Request Form

Please return form (via mail, fax, or email) to:
 Nancie Stover-Nicholson
 HPS Coordinator
 Upstate AHEC
 200 N. Main St.
 Ste. 201
 Greenville, SC 29601
 Phone: 864-238-2648
 Fax: 864-349-1179
 Email: nstover@upstateahec.org

- Please complete all sections.
- You should submit an application as soon as your rotation dates are confirmed.
- You will be notified by Upstate AHEC if housing is available during the requested dates.
- There is a housing fee of \$75 per week for out-of-state students, if applicable. This fee is due at least two weeks prior to taking occupancy of Upstate AHEC housing.

Date: _____

Name: _____ **Gender:** _____

Present Address: _____

Permanent Address: _____

Phone Number: _____ **Email Address:** _____

Emergency Contact: _____ **Phone(s):** _____

University/Department: _____

Degree Program: _____ **Current year of training:** _____

School Contact (Name, Phone Number, Email): _____

	Rotation 1	Rotation 2 (if applicable)	Rotation 3 (if applicable)
Course Name and Number			
Rotation Site/Preceptor Name			
Rotation Dates (Begin and End)			
Housing Dates (Begin and End)			

For office use only:
 Housing Available: _____
 Student Notified (Date): _____
 Housing Agreement/Policy Form Received (Date): _____
 Housing Fee Received (Amount/Date): _____