Visitor/Visiting Student Housing Application

Please Indicate:

☐ Visitor
☐ Visiting Student (Documentation must be provided from current school’s registrar’s office)

Today’s Date:
Month/Day/Year

Please email this application to housing@mountsinai.org or angela.moura@mountsinai.org or fax to (212) 831-3093.

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

Last (Family) Name

First Name

Male ☐ Female ☐

Current Contact Information:
Street Address:
Apt. #:
City:
State:
Zip Code:
Country:
Email Address :
Telephone Number:

Date you start your study:
Month/Day/Year

Mount Sinai Department (Please be specific):

Departmental contact person and phone number:

Note: Your accommodations will have furniture, but NO sheets, pillows, towels, blankets, kitchen utensils, bathroom supplies, telephone, internet, television, or radio.

Date Housing is needed: From: Month/Day/Year To: Month/Day/Year

Private Room Only
Please note that smoking is NOT permitted.

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.