

Course Attending: \_\_\_\_\_

Course Start Date: \_\_\_\_\_

## Registration Application

To complete the process, please complete the registration form and attach a **\$25.00** Non-refundable registration fee. Registrations will not be processed without full payment.

**Please mail money order or cashier check to:**

**Leasing Career & Management Training, LLC**  
760 Old Roswell Road Roswell, Georgia 30076  
Office: 770-250-3296 \* Fax: 678-433-0770  
Email: [register@leasingcareer.info](mailto:register@leasingcareer.info)  
Web: [www.leasingcareer.info](http://www.leasingcareer.info)

Date: \_\_\_\_\_

### STUDENT'S INFORMATION:

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_  
Street Address: \_\_\_\_\_ Town/City: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_  
Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ Email: \_\_\_\_\_  
Are you a citizen of the United States? \_\_\_\_\_ Yes / No \_\_\_\_\_  
Have you ever been convicted of a felony? \_\_\_\_\_ Yes / No \_\_\_\_\_ If yes, explain

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### EDUCATION:

High School Street Address: \_\_\_\_\_ Town/City: \_\_\_\_\_  
From: \_\_\_\_\_ To \_\_\_\_\_ did you graduate \_\_\_\_\_ Yes / No \_\_\_\_\_  
College: Address: \_\_\_\_\_ Town/City: \_\_\_\_\_  
From: \_\_\_\_\_ To \_\_\_\_\_ did you graduate \_\_\_\_\_ Yes / No \_\_\_\_\_

### REFERENCE:

Please list two professional reference (name, phone number email address title).

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Job Title: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Job Title: \_\_\_\_\_

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Are you a native English speaker? \_\_\_\_\_ Yes / No \_\_\_\_\_ If not, what is your native language?  
\_\_\_\_\_ \*\*If English are your second language\*\* How would you describe your

English skills? (1=poor; 5=excellent) Speaking:

Spanish: 1 2 3 4 5

Reading: 1 2 3 4 5

Writing: 1 2 3 4 5 How many years of English study have you had?

\_\_\_\_\_

Please circle how you heard about Leasing Career & Management Training, LLC:

Management Company Website Friend Word of Mouth Facebook Job Fair Flyer  
Other \_\_\_\_\_

**FAQ:**

Have you ever worked in the apartment industry before (circle one) Yes or No? If yes, name of property?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why are you looking for a new career change? Please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tell us little about yourself?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you a people person? (circle one) Yes or No

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What challenges are you looking for in your new leasing career?

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Do you have transportation to get to and from class? (**circle one**) Yes or No

Do you have experience in sales or marketing? (**circle one**) Yes or No

If so, please explain

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**EMERGENCY CONTACT INFORMATION:**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Relation to student \_\_\_\_\_

*I certify that my answers are true and complete to the best of my knowledge.*

*I understand that false or misleading information in my application may result in my release from participation in the leasing training course.*

Name: \_\_\_\_\_ Date: \_\_\_\_\_

*Please print clearly*

Signature: \_\_\_\_\_

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