



Metro On Central Application Form

Please fill in form fields below save and email application to: info@metrooncentral.com

Contact 0439 885551

Full Name*	Gender*
University /Tafe Campus*	DOB*

Your address / country*

Please supply one of the following
Driving License Number / Passport Number*

email address*

Parents Guardians Name and address*

Parents Guardians phone Number*

Do you smoke*
Would you prefer to stay with*

Length of stay* 3x months \$250 (13x weeks)
 6x months \$235 (26x weeks)

Flatmate Preference
"how would you describe your personality"
Cleanliness

Length of stay* 11x months \$230 (48x weeks)
 12x months \$225 (52x weeks)

Date of arrival*

Additional Information regarding flatmates you would prefer to stay with.

Require Linen Pack*
Require Car Park*