MPIM ACCOMMODATION REQUEST

Salutation Family name First name Title Nationality e-mail address			□ Mrs.		
Begin of tenancy End of tenancy	·	·			
Number of adults (incl. yourself) Number of children (incl. ages)					
Preferred accommodation ☐ MPIM (apartments from our ☐ Universitätsclub Bonn (furnis ☐ Hotel (short stays)	•		• ,		
Type of accommodation ☐ furnished ☐ unfurnished			room in a flat Studio / Singlo 1 bedroom + bedrooms	e apartment living room	n
Maximum amount of monthly ren	t (excludin	g add	itional charge	s)	EUR
Additional requests Smoker Do stairs present a problem for your Allergies Parking lot	ou?		□yes □yes □yes □yes	□no	
Crib Childcare			□yes □yes	□no □no	
Please specify special requireme	nts				
With my signature I confirm that I would like help from the that my personal informative expressed interest in renting my understanding that the and is not a contractual page.	on may be pg a certain ac MPIM acts o	passe comn	d on to the re nodation, and	spective landle	ord/-lady after I have
Date, Signature					

Please send this form by e-mail to housing@mpim-bonn.mpg.de
(Please advise us immediately of any subsequent changes to your visiting dates or details!)