

Student

Student Number	First	Last	Gender	Date of Birth	Current Status	Additional Comments	Residence Type	NOK Name	NOK Relationship	NOK Phone	NOK Street	NOK City	NOK State	NOK zip
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Minor	Major	Special Needs	Street	City	State	Zip	Nationality	Class	Phone Number	Email	Staff Number
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Course

Course Number	Title	Room Number	Instructor Email	Instructor Phone	Department	Instructor Name
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Takes_Course

Student Number	Course Number
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Apartment

Apartment #	Available Rooms	Staff Number	Residence #
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Inspection_Report

Date	Staff Name	Satisfactory	Additional Comment	Apartment #
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Residence_Hall

Name	Hall Manager	Phone Number	Residence #
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Rented_Residence

Residence #	Address
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Room

Place Number	Room #	Rent	Residence #
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Staff_Member

Staff Number	First Name	Last Name	Date of Birth	Gender	Street	City	State	Zip	Location	Position	Email Address
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Advisor

Name	Position	Room Number	Email Address	Phone Number	Department	Staff Number
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Lease

Lease Number	Duration	Rental Address	Move out Date	Move In Date	Room Number	Phone Number
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Invoice

Invoice Number	Payment Method	Rental Address	Payment Receive Date	Room Number	Payment Due Date	Place Number	Student Number	Lease Number
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Reminder

Reminder Date	Invoice Number
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Rents

Student Number	Residence Number	Lease Number
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