

# HOUSING application

## UNIVERSITY OF THE WEST HOUSING APPLICATION

Please print clearly

Check term applying for:  FALL 2019  SPRING 2020

Last/Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

UWest ID: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender:  M  F  
 Monastic

Mailing Address Street: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### Emergency Contact (Required):

Last/Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Relationship \_\_\_\_\_

Mailing Address Street: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### Check class status

Freshman  Sophomore  Junior  Senior  Graduate/Ph.D.  Certificate/ESL

### Check your category for 2019-2020

New Student  Continuing Student  Transfer Student  Exchange Student

Do you smoke?  Yes  No

Please note: All university housing facilities are smoke-free environments.

Do you have any physical challenges that require specific accommodation?  Yes  No

If yes, have you registered with Disabled Student Services?  Yes  No

Please describe the type of accommodation requested: \_\_\_\_\_

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

Do you have a roommate or room request?  Yes  No

If yes, please list the name and Student ID number of your roommate request(s). Roommate requests must be mutual. Room requests are only available for returning residents.

### Roommate Preference:

Name of Requested Roommate: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

Name of Requested Roommate: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

Expected Date of Arrival: \_\_\_\_\_

Continued on back



Note: Your move-in day will be mailed to you. Early arrivals must make a special request with the Director of Housing and Residential Life and be approved to arrive early. Otherwise, a \$100 improper check-in fee may apply.

Do you authorize UWest Housing to release your name, address, and phone number to potential roommate(s) with whom you will be placed?

Yes     No

**Housing Preferences**

Please indicate your preferred room choice by checking the appropriate box below:

Single Room Occupancy Room & Board
<input type="checkbox"/> Plan A: 250 Meals: \$5,665    or <input type="checkbox"/> Plan B: 200 Meals : \$5,315
Double Room Occupancy Room & Board
<input type="checkbox"/> Plan A: 250 Meals: \$3,998    or <input type="checkbox"/> Plan B: 200 Meals : \$3,648
Triple Room Occupancy Room & Board
<input type="checkbox"/> Plan A: 250 Meals: \$3,447    or <input type="checkbox"/> Plan B: 200 Meals : \$3,097

Returning students have priority in selecting single and double rooms.

All residents are required to purchase the basic package for Room & Board.

Unused meals are non-refundable and do not roll over to summer nor to the next academic year.

Residents may purchase /additional meal plans during the semester.

No meals are served on UWest holidays.

**AGREEMENT**

By signing below I attest all information provided on this agreement is accurate and correct. I have read and understood the University Housing Agreement. I understand any violation of the University Housing Agreement or the University's policies may result in disciplinary action, including but not limited to removal from University housing and dismissal from the University. I also understand this agreement is not binding until signed by myself, a parent, or a guardian if I am under the age of 18, and an authorized University official.

Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_

A parent or guardian is required to sign below if the student is under 18 years of age.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

ONCE YOU SUBMIT THE HOUSING APPLICATION, IT IS A LEGALLY BINDING CONTRACT FOR THE ENTIRE ACADEMIC YEAR.

MID-YEAR CANCELLATIONS ARE RARELY PERMITTED, UNLESS YOU WITHDRAW FROM UNIVERSITY OF THE WEST.

Return completed and signed application to:

**UWest Office of Residential Life**

1409 Walnut Grove Ave

Rosemead, CA 91770

Fax: 626.571.1413

Email: housing@uwest.edu

HOUSING OFFICE USE ONLY:	
Date received : _____	Confirmation mailed: _____
Entered by: _____	CampusVue entered: _____
Reservation: _____	Room assignment: _____

