

SUMMER HOUSING application

UNIVERSITY OF THE WEST HOUSING APPLICATION

Please print clearly

Check term applying for: FULL SUMMER
May 20, 2019 – August 9, 2019 SUMMER SESSION A
May 24, 2019 – August 9, 2019 SUMMER SESSION B
June 14, 2019 – August 9, 2019

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: _____

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Expected Date of Arrival: _____/_____/_____

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:

	FULL SUMMER May 20, 2019 – August 9, 2019	SUMMER SESSION A May 24, 2019 – August 9, 2019	SUMMER SESSION B June 14, 2019 – August 9, 2019
Single Room Occupancy Room & Board	<input type="checkbox"/> 75 Meals: \$3,128	<input type="checkbox"/> 75 Meals: \$3,001	<input type="checkbox"/> 75 Meals: \$2,330
Double Room Occupancy Room & Board	<input type="checkbox"/> 75 Meals: \$2,014	<input type="checkbox"/> 75 Meals: \$1,941	<input type="checkbox"/> 75 Meals: \$1,555
Triple Room Occupancy Room & Board	<input type="checkbox"/> 75 Meals: \$1,645	<input type="checkbox"/> 75 Meals: \$1,590	<input type="checkbox"/> 75 Meals: \$1,299

Notes:

Returning students have priority in selecting single and double rooms.

All residents are required to purchase the basic package for Room & Board which includes the 75-meal plan for Session A and Session B.

a. Each meal costs \$6.80

b. Unused meals are non-refundable and do not roll to the next term/semester

Residents may purchase /additional meals through the accounting office.

Extended stay housing rates will be based on resident's current room type or preference.

This computation is based on the durations of each summer session. 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 Residence Hall Community Guidelines contained in this 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: _____

