

## HOWARD COLLEGE HOUSING APPLICATION

	OFFICE USE
	Rec Application
	Rec Deposit
l	Rec Meningitis Form
	Sent request for
	date

Indicate the term and year for which you are applying:

Academic Year 17-18	Spring 20	Mini 20	_ Summe	er I 20	Summ	er II 20		
Name:Last			First			Middle		
Mailing Address:		City			State		Zip	
SS#:	How	vard College ID#:		E-Mail a	address:			
Home Phone #		Cell Phone	e#					
Date of Birth:	Male Fema	ale Ethnicity	: Black l	Hispanic	White	Other		
Roommate Preference:								
What is your area of study	/?							
Will you be a member of a	any school sponsored	d team or organization	า? :					
Emergency Contact Info	ormation:							
Parent/Guardian Name(s)	):							
Phone: Home		Work _						
List a second contact:		Phone						
Medical Information: Insurance Company:			Policy # _		Group # _			
Insurance is under what r	name?							
Effective January 1, 201 a vaccination for bacteri when submitting this ap	al meningitis at leas pplication.	st ten days prior to ta	aking residenc	e. All resid	lents must in	nclude proof o	of vaccination	
List any medications you	are allergic to and/or	medical conditions th	at may be perti	nent to the	type of medic	al attention yo	u receive:	
Liability Release: I release physical, mental, or mone			epresentatives	from any r	esponsibility	for incidents t	hat cause me	
Have you ever been con	victed of a felony?	□No □Ye	s (if yes pleas	e explain o	n separate s	heet of paper	)	
Date:	Applicant	Signature:						

This application and contract become valid when completed and returned with a \$100 room deposit made payable to Howard College. Deposits are refundable only if requested by July 15 for the 2017-2018 academic year, December 15 for new housing applicants for the spring '18 semester, and May 1 for summer terms. *All Housing fees are subject to change without notice.* 

This agreement	, between the Howard			RESIDENCE HALL a state institution, he		I to as "District" and:		
*Last Name	Fir		Middle Initi	al	Social Security #			
			sa salaat ama).					
Occupancy ter	m covered by this c	ontract (piea	se select one):					
Academic Year		Spring	Summer I	Summer II	Mini			
Cost per semes		****	1261.17					
HC Fall and S <sub>l</sub> All Rooms	\$700.00	HC Sumi Summer*	ner and Mini Term	<u>ns</u> n session   + \$50 laur	der foo - \$250			
Meals	\$1,472.52	Mini*		60 laundry fee = \$250				
Laundry Fee	\$ 50.00	WIIII	φ200 + φ5	ο faultury fee = \$250	,			
Гах	\$121.48	*A meal n	lan is not available f	for these terms.				
Total	\$2,344.00							
above. HC reseplan.	erves the right to ch					specified and the cont Halls are required to		
Payment Agree	ement (Check One)							
Scholar	ship (please specify	what will be o	covered) Ful	ll room & board	Room only _	\$ amount		
Paymen	t in Full (Due at reg	istration.) (St	udent must pay in fu	all for summer and m	nini)			
	nent Plan: First pay Service Information			ing payments due or	dates indicated	by the Business Office	e. See Housing and	
TRC/V	R pays in full; if in p	part, Amoun	t \$					
Payment is due		registers for c	lasses and/or moves			is non-refundable rega the District.	ardless of reason for	
and regulations Handbook and	o abide by the terms governing the condu	act of students at may be for	s which are now in our and by logging on	effect and any that n	nay be reviewed a	desidence Hall Supplem and published at a late Forms & Publications.	er date. The Student	
for repairs, or to possible, room on an emergency on halls, the Distric	o make repairs. The centry will be arranged when circumstances	college reserv d in advance; s warrant stroi to use the serv	es the right to enter however, authorized ng evidence of violat vices of law enforcer	any room to maintain d representatives of the cion of college policion ment and/or private a	n discipline and to the college shall hes. In order to cor agencies to search	to check the condition of provide security of state the immediate right of the use of illegal data for drugs in the residents.	tudent's property. It to enter in case of lrugs in the residence	
department are personal prope	not liable for loss fr	om theft or community insurance, eit	lamage to any propo her with their parent	erty belonging to stu ts' homeowners' insu	idents or guests.	property, Howard Colle All students are urge by a special student pol	ed to make sure that	
	to assume and be peto have executed the			tal payments and o	ther obligations	provided for above.	In witness whereof	
Student's Signa	fure			;	Date		_	
ona one o orgina					_ ***			
Residence Hall	Director Signature			:	Date		_	
status, or any o	ther legally protected	l status in edu	cational programs, a	activities, admission	or employment	rigin, sex, disability, a practices. The followin 001 Birdwell Lane, Big	ng position has been	

(432) 264-5100. Revised 12/1/2016