SEND APPLICATION TO:

UCM @ UBC - GERARD HOUSE 2026 Wesbrook Mall, Vancouver, BC V6T 1W3 Office: 604.222.0160 | ucmubc@ucmonline.ca

SESSION APPLYING FO	OR:		
☐ SPRING/SUMMER:☐ FALL/WINTER:	May 1 – August 31 September 1 – April 30		
PERSONAL INFORMAT	TION:		
First name:	t name:Last name:		
Home address:			
City:	Prov:	Postal code:	
Email:		Phone: (_)
Birth date:/_	/Citizenship	p:	🗖 Male 🗖 Female
School (UBC/ Affiliate Co	ollege):		Year at UBC:
Undergrad/ Graduate: _			Year of study:
Faculty:	Student Number:		
Lower level – ☐ east (sir	ngle) centre (single) we	preference	
	roommate for the double room? Email:		
	ust submit a separate applica		
SLEEPING AND LIVING I am an Early Bird in t I am quiet in my roor I prefer it to be quiet	the morning	a Night Owl at night loud in my room er it to be busy around n	ny room
PARKING: Do you wish to rent a pa	rking space for a vehicle at \$6	60 per month? ☐ Yes ☐	No
Vehicle make/model:			Color:
Plate number:	Province:		

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Residence Application GERARD HOUSE

Last name:	First name:		
Home address:			
		Postal code:	
Email:		Phone: ()	
CHARACTER REFERENCES	:		
Please provide two character from a past room mate, if po		uld be from your Core Leader or Co-Leade	r and anothe
Last name:	First na	First name:	
Home address:			
		Postal code:	
Email:		Phone: ()	
		Duration:	
Last name:	First name:		
Home address:			
		Postal code:	
Email:		Phone: ()	
Relationship:		Duration:	
PASTORAL REFERENCE:			
	om vour pastor/minister/pries	. (Note: UCM Staff require that you ask the	em personally
before you use them as a ref		. (Note: Journal and State Journal and	, perserium,
Name of church congregation	n:		
		Duration:	
		Postal code:	
		 Phone: ()	
		·	
APPLICATION QUESTIONS	•		

☐ Please download and read the RULES & COVENANT AGREEMENT document from the website.

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PLEASE ATTACH:	
☐ Letter of reference (or an email) from one of your ch	aracter or pastoral references.
PLEASE READ AND SIGN:	
in the Thursday Night gathering, prayer, discipleship, fel	• •
$\hfill \square$ I have read and agree with the RULES & COVENANT	AGREEMENT (separate document).
complete, and I authorize verification of information from	the information reported on this form is true, correct and om references or other sources. I acknowledge that this at when approved and that I have received a copy of the
Applicant signature:	Date: