

APPLICATION FOR UNIVERSITY HOUSING 2020-2021

Complete both sides of this form and return with first payment in the provided housing envelope.
Your contract will be mailed to you or can be printed from our website.

PAYMENT DUE WITH APPLICATION. Return this application with the first room and board payment of \$200 plus a damage deposit of \$150. (The first room and board payment is not required if you have paid the Enrollment Deposit) The date we receive your payment establishes priority when assigning rooms. Charges apply for canceling your application after the priority deadlines, which are **May 1** (returning students), **June 1** (new students) for Fall applications and **December 10** for Spring applications. Visit lssu.edu/housing for complete details.

Check the semester(s) for which you are applying for university housing:

Fall & Spring Semesters 20____ Fall Semester 20____ only Spring Semester 20____ only

PERSONAL INFORMATION

Name: _____ Preferred Name: _____ Student ID: _____
Street: _____ Birthdate: _____
City, State & Zip _____ Home Phone: _____
E-mail: _____ Cell Phone: _____
Gender: _____ Cell Provider: _____
Year of High School Graduation: _____ I opt out of update texts from Campus Life & Housing
 First-time college student Transfer student Have you lived on LSSU's campus before? _____ Major: _____
Have you ever been convicted of a felony? Yes No List all allergies: _____

PARENT/LEGAL GUARDIAN INFORMATION

Name: _____ Relationship: _____
Street: _____
City, State & Zip _____ Home Phone: _____
E-mail: _____ Cell Phone: _____

EMERGENCY CONTACT INFORMATION

Same as Parent/Guardian Information

Name: _____ Relationship: _____
Street: _____
City, State & Zip _____ Home Phone: _____

HOUSING AND DINING ACCOMMODATIONS

Please list any medical conditions that require special housing consideration: _____

Special Dietary Needs: _____

AUTHORIZATION

I understand that LSSU's acceptance of this application for residence hall and food service accommodations will ensure that I will be assigned to a residence hall and food service plan, but does not guarantee me the residence hall or food service preference(s) I have indicated. I hereby represent that each answer is truthful and constitutes a full and complete disclosure of my knowledge with respect to the questions and I understand that any misrepresentation of facts shall constitute cause for dismissal regardless of when discovered by the University. (If you are a returning student, your signature is also authorizing the Campus Life & Housing Office to retain your damage deposit for the following academic year.)

Signature: _____ **Date:** _____

To request special accommodations, in addition to filling out the housing application, it is required that you register with the LSSU Office of Accessibility Services. The coordinator of Accessibility Services will verify your access needs and advise housing staff of appropriate accommodation. Campus Life & Housing staff will facilitate the housing accommodation based on application date and availability. Questions regarding accessible student housing may be directed to Sharmay Wood, Director of Campus Life & Laker Success at smwood@lssu.edu.

Last Name, First Name: _____ Student I.D. _____

LIFESTYLE & PERSONAL PREFERENCES

The information provided below will be used to help us assign your room. Please answer all of the questions as accurately as you can.

Do you smoke? Yes No (Note: LSSU is a tobacco-free campus.)

Do you object to a roommate who smokes? Yes No

Do you prefer a quiet space? Yes No

Do you prefer to:

- keep your room neat with everything in its place most of the time?
- not worry about how your room looks, letting it get cluttered sometimes or even most of the time?

Do you prefer to go to bed:

- relatively early (generally before 10 pm)?
- late (generally after 10 pm)?

When you are studying, are you:

- easily distracted, preferring relative quiet?
- able to ignore background noise?
- able to ignore background noise, and/or do you actually prefer to have some background noise (e.g. music)?

Do you prefer the temperature of your room to be:

- hot?
- cold?

Do you expect your room to be:

- a fairly private place to relax and study?
- a place where your friends come to socialize a bit?
- a little of both

How do you feel about having your roommate use/borrow your things?

- I don't care.
- It's okay as long my roommate asks.
- My roommate should never use my things.

How do you feel about your roommate having a significant other in your room?

- I don't care.
- I would prefer not.

What do you enjoy doing in your spare time?

- | | |
|---|--------------------------------------|
| <input type="checkbox"/> Video Gaming | <input type="checkbox"/> Sports |
| <input type="checkbox"/> Internet Surfing | <input type="checkbox"/> Reading |
| <input type="checkbox"/> Outdoor activities | <input type="checkbox"/> Socializing |
| <input type="checkbox"/> Television/Movies | <input type="checkbox"/> Exercising |
| <input type="checkbox"/> Crafting | <input type="checkbox"/> Photography |

Do you enjoy any sports?

- | | | |
|--|-------------------------------------|-----------------------------------|
| <input type="checkbox"/> Football | <input type="checkbox"/> Tennis | <input type="checkbox"/> Fishing |
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Swimming | <input type="checkbox"/> Biking |
| <input type="checkbox"/> Soccer | <input type="checkbox"/> Diving | <input type="checkbox"/> Hunting |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Golfing | <input type="checkbox"/> Hockey |
| <input type="checkbox"/> Rollerblading | <input type="checkbox"/> Volleyball | <input type="checkbox"/> Skating |
| <input type="checkbox"/> Snowboarding | <input type="checkbox"/> Hiking | <input type="checkbox"/> Kayaking |

What genres of music do you prefer?

- | | | |
|------------------------------------|---------------------------------|--------------------------------|
| <input type="checkbox"/> Rock | <input type="checkbox"/> Dance | <input type="checkbox"/> Other |
| <input type="checkbox"/> Pop | <input type="checkbox"/> Techno | _____ |
| <input type="checkbox"/> Country | <input type="checkbox"/> Metal | _____ |
| <input type="checkbox"/> Classical | <input type="checkbox"/> Rap | _____ |
| <input type="checkbox"/> Hip-Hop | <input type="checkbox"/> Gospel | _____ |

I consider myself in solidarity with LGBTQIA+ students and I believe I would be a good roommate for other LGBTQIA+ allies and/or members of the LGBTQIA+ community.

- Yes, and I would prefer the gender identity of my roommate or roommates to be _____ No preference
- No
- Unsure

HOUSING PREFERENCES

Please rank your TOP 3 CHOICES with numbers.

See floor plans at Issu.edu/housing.

TRADITIONAL HOUSING

MUST BE out of high school less than 27 months.

- OSBORN HALL (Women)
- BRADY HALL DOUBLE (Men)
- BRADY HALL QUAD (Men)
- THE VILLAGE (Co-ed)

UPPER-CLASS HOUSING

MUST BE out of high school more than 27 months.

- (All options are co-ed)
- OSBORN HALL
 - TOWNHOUSE DOUBLE
 - MOLONEY HALL SINGLE
 - MOLONEY HALL DOUBLE
 - MOLONEY HALL TRIPLE
 - NEVEU HALL
 - THE VILLAGE

LIVING LEARNING COMMUNITIES*

MUST BE out of high school more than 27 months.

- (All options are co-ed)
- ONTARIO HALL (Honors Program)
 - HURON HALL (Chemistry & Environmental Science Club)
 - LAKER HALL (Fisheries & Wildlife Club)
 - CHIPPEWA HALL (Engineering & Technology Program)
 - ERIE HALL (School of Criminal Justice, Fire Science, and EMS)

- GENDER INCLUSIVE (Contact the Housing Office) PRIVATE ROOM PREFERRED

*Additional application required. See website.

ROOMMATE PREFERENCE(S)

Please specify with whom you would like to share a bedroom/residence. (If applicable.)

Name of student: _____

FOR OFFICE USE ONLY

Application Rec'd Date _____

Payment Date _____

BRD _____	ERI _____
OSB _____	LAK _____
STV _____	ONT _____
TWN _____	HUR _____
CHP _____	NEV _____
EDH _____	MOL _____

Room Assignment Meal Plan
Environmental Fee