

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.

