

On-Campus Housing Application

Last Name: _____ First Name: _____ M.I.: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Mobile Phone Number: _____

Email address: _____ Program of Study: _____

Closest living relative/spouse: _____ Phone Number: _____

Family Physician: _____ Phone Number: _____

First-year student ____ Second-year student ____ semester/ year fall ____ spring ____ 20 ____ Male ____ Female ____ Age ____

PREFERENCE (S): The Residential Life staff at Washington County Community College will be working to make your stay as comfortable as possible. Please take a few minutes to answer the following questions to help us assign roommates and arrange residential life programs for you. Remember, if you desire a specific person as a roommate, you both must request each other on your individual applications.

- 1. Do you smoke? (WCCC is tobacco free) Yes / No
- 2. Would you prefer a non-smoking roommate? Yes / No
- 3. Do you study with the stereo on? Yes / No
- 4. Are you a "night" person? Yes / No
- 5. Do you have a specific person (s) you would like to room with? Doesn't matter ____ If so, please list:

- 6. Do you plan to:
 - a. Go home on most weekends? Yes / No
 - b. Stay on campus most weekends? Yes / No
 - c. Go home only on long weekends? Yes / No
- 7. Are there any medical problems or specific diet concerns of which the staff should be aware? LIST:

- 8. Have you ever been convicted or adjudicated of a crime other than a traffic violation? (If so, please describe briefly)

- 9. Which characteristics best describe your personality?
 - a. quiet
 - b. relatively quiet
 - c. sometimes quiet, but sometimes outgoing
 - d. outgoing; interested in nearly everything
 - e. hyper!!

- 11. Is there a medical or personal reason that you feel you need a single room? If yes, please explain.

The primary objective of the Residential Life staff is to provide an atmosphere conducive to study, relaxation and growth. Therefore, all residents are asked to follow guidelines set forth in the Student Handbook and Housing Contract. Residents are strongly encouraged to become familiar with the policies and procedures.

Return this completed application with a \$150 room reservation deposit to the Student Accounts Office. Make your check or money order payable to Washington County Community College. For credit card use, contact Heather Smale, 207-454-1025.

Washington County Community College is Alcohol and Drug Free

Student Signature: _____ Date: _____

For Business Office Use Only

Date Received: _____ Receipt #: _____ Received By: _____