

**PERSONAL DATA**

Student ID Number \_\_\_\_\_

Name (First, Middle, Last) \_\_\_\_\_ Nickname \_\_\_\_\_  Male  Female

Current Campus Residence Building \_\_\_\_\_ Room \_\_\_\_\_ Number of Terms Lived On Campus \_\_\_\_\_

Home Address \_\_\_\_\_ Home Phone (\_\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_

E-mail Address \_\_\_\_\_ Birthdate \_\_\_\_\_

*Please indicate any physical or health conditions that need to be considered when making your room assignment. Information regarding disabilities will be used only to assist in appropriate housing placement.* \_\_\_\_\_

**ACADEMIC STATUS**

Academic status this upcoming academic year:  Freshman  Sophomore  Junior  Senior

Entrance term:  Term I \_\_\_\_\_  Term II \_\_\_\_\_  Term III \_\_\_\_\_  Summer \_\_\_\_\_ (Add year on blank)

**HALL AND COMMUNITY PREFERENCE**

Please rank your residence hall and community preferences, beginning with your first choice, second choice, and so on. Preferences will be honored by application date and space availability; however, your first choice is not guaranteed.

Alverno \_\_\_\_\_ Noonan \_\_\_\_\_ No Preference \_\_\_\_\_

Baxter-DiGiovani (must complete additional application) \_\_\_\_\_ Single (must complete additional application) \_\_\_\_\_

**LIVING LEARNING COMMUNITIES**

Music, Arts & Drama House (First-year & returning students)

**MEAL PLAN** University food service offers unlimited portions at the cafeteria:

Plan A...200 meals/term & \$160 Flex  Plan B...150 meals/term & \$160 Flex

Plan C...90 meals/term & \$160 Flex  Plan D...70 meals/term & \$160 Flex (juniors & seniors only)

**ROOMMATE PREFERENCE**

Do you have a preferred roommate in mind?  No  Yes (Please indicate the name below.)

First and last name of preferred roommate \_\_\_\_\_

**IF YOU DO NOT HAVE A ROOMMATE PREFERENCE, PLEASE COMPLETE THE FOLLOWING**

Provide additional information we need to help select your roommate: \_\_\_\_\_

Student requests for a specific residence hall room and/or roommate are not guaranteed. The University makes all final decisions and reserves the right to make changes in residence hall assignments if necessary for the most effective accommodation of the student body.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**Students under 18 years of age must have this agreement signed by a parent or guardian.**

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Housing Deposit Payment Options**

*Housing deposit is required before the Housing Application can be processed.*

Check payable to Briar Cliff University for \$60.

Cash

Credit card payment (Receipt must be provided from Business Office)

Received by \_\_\_\_\_

*Make all checks payable to Briar Cliff University. Room deposits are non-refundable.*

**FOR OFFICE USE ONLY**

Student ID# \_\_\_\_\_

Date \_\_\_\_\_

Hall \_\_\_\_\_

Room \_\_\_\_\_

Room Type \_\_\_\_\_

Letter \_\_\_\_\_

Database \_\_\_\_\_

Datatel \_\_\_\_\_