

HOUSING APPLICATION AND ENROLLMENT DEPOSIT FORM

.

Nam	e					Sex: M	F
	essStreet		City		State/Cour	ntry	Zip
E-Mail				Parents' Name			
Antic	cipated Entrance Da	ate:		Telephone	e Number ()	
	ring Year Classifica						
	ASE CHECK HER						
PLEA	ASE COMPLETE	FOLLOWING S	SECTION IF Y	OU REQUIRE	COLLEGE HO	OUSING:	
1.	Roommate Prefe (Roommate requests r	erence	mitted to be consider	red.)			
2.	Would welcome an international roommate Would be willing to have an international roommate Would prefer not having an international roommate (Please check preference)						
3.	Residence Hall Preference (if any): First choice Second Choice (Residence hall requests are subject to availability.) Second Choice						
4.	Academic Interests						
5.	Co-curricular Interests						
6.	What is your favorite type of music?						
7.	If you have a physical handicap, allergies or other medical condition that requires a special room assignment, please explain.						
8.	Please rate yours	self on the follow	wing scale:				
	Messy	1	2	3	4	5	Neat
	Loud	1	2	3	4	5	Quiet
	Outgoing	1	22	3	4	5	Reserved
	Please list words				•	-	
	Ret	urn to the Admis Office of Adı	ssions Office alo nissions, 101 7 th	ng with <u>2 photo</u> St SW, Orange	<u>s and the \$100 c</u> City, IA 51041	leposit.	
FOR OFFICE USE ONLY Residence Hall ID#				Signature			
RoomRoommate							

Date