

# STUDENT HOUSING

## 2017-2018 Application



### ELIGIBILITY:

- Must be a full-time student (at least 12 credits each semester). Contact Director of Student Life if not a full-time student.

### WHAT'S INCLUDED:

- Utilities (Heat, Water, Electricity, etc.)
- High Speed Internet
- Expanded Basic Cable TV
- Standard twin bed and dresser
- Kitchen table and chairs
- Stove & refrigerator

### DIRECTIONS:

- Fill out both sides of the application completely.
- Sign the bottom of the application.
- Return your completed application **and your \$150 security deposit**. Applications received without a security deposit are not valid.

Applications should be mailed to:  
**Bay College Student Housing**  
**2001 N. Lincoln Road**  
**Escanaba, MI 49829**

Questions? Contact:  
**Dave Laur**  
**906-217-4031**  
**dave.laur@baycollege.edu**

FIRST & LAST NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY, STATE & ZIP CODE: \_\_\_\_\_

PREFERRED/NICK NAME: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

HIGH SCHOOL OR PREVIOUS COLLEGE GPA: \_\_\_\_\_

ACADEMIC PROGRAM OR MAJOR: \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF AN ASSAULTIVE CRIME, DRUG CRIME, OR FELONY AND/OR DO YOU HAVE PENDING CRIMINAL CHARGES FOR AN ASSAULTIVE CRIME, DRUG CRIME, OR FELONY?  Yes  No

**RETURNING STUDENTS ONLY;** PLEASE INDICATE YOUR PREFERRED APARTMENT FOR 2017-2018: \_\_\_\_\_

### First Choice

### Semester Rent

### Refund Policy

4 person/2 bedroom apt.

\$1500\*

- Cancel by June 15: 100% refund of deposit

2 person/1 bedroom apt.

\$1600\*

- Cancel June 15-Aug.1: 50% refund of deposit

- Cancel after Aug. 1: Forfeit deposit

**Semester rent is non-refundable/adjustable after the second Friday of the semester.** *Rent must be paid in full, covered entirely by Financial Aid, or student enrolled in the FACTS payment plan through the Student Accounts Office by your tuition due date or your housing assignment may be cancelled and your classes dropped.*

ROOMMATE PREFERENCE(S): 1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_

*\*Estimated cost pending approval by the Bay College Board. Rates are set in June and may change per Board approval.*

NAME: \_\_\_\_\_ BAY COLLEGE ID #: \_\_\_\_\_

AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

YEAR OF HIGH SCHOOL GRADUATION: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

MALE  FEMALE

SELF-IDENTIFY \_\_\_\_\_

**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 midnight)?
- Late (generally after midnight)?

**When you are studying, are you:**

- Easily distracted, preferring relative quiet?
- Able to ignore background noise?

**Do you expect your apartment to be:**

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

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

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

**How do you feel about your roommate having students of the opposite sex in your apartment?**

- I don't care
- I would prefer not

**EMERGENCY CONTACT INFORMATION:**

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

**MISSING PERSON CONTACT INFORMATION (If different than Emergency Contact Information):**

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

## COLLEGE POLICY

Student Housing is completely alcohol/tobacco free, regardless of resident(s) or guest(s) age.

**Office Use Only**

Security Deposit received?  
Date \_\_\_\_\_ By \_\_\_\_\_

Background Check completed  
Date \_\_\_\_\_ By \_\_\_\_\_

I represent that each answer is truthful and constitutes a full and complete disclosure of my knowledge with respect to the questions and hereby authorize a criminal background check as may be necessary in reaching a decision regarding acceptance of this housing application. I understand that any misrepresentation of facts shall constitute cause for removal from student housing, regardless of when discovered by the College. I understand that Bay College's acceptance of this application for student housing accommodations will ensure that I will be considered for a student apartment, but does not guarantee me the apartment/roommate preferences I have indicated.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_