

2009 Summer Housing Application and Contract

Meredith College

For Office Use Only Date Received

Room Assignment

Name _____

Student ID Number _____ Class _____

Current address _____ Phone _____

Email address _____@meredith.edu Cell Phone (____) _____

Emergency Contact Person _____

Relationship _____ Phone _____

Room type _____ Double _____ Private (additional \$140 per 3 wks; \$280 per 6 wks)

Do you have a roommate request? _____

Do you have a request for suitemates? _____

(mutual request will be honored as space allows)

Dates that you are applying for on-campus housing (check all that apply):

___ 1st Six-weeks May 11 – June 19

___ 1st Three-weeks May 18 – June 5

___ 2nd Six-weeks June 22 – July 31

___ 2nd Three-weeks June 8 – June 26

___ 3rd Three-week July 6– July 24

If you will be working on campus, doing an internship or working as a co-op student, indicate below the dates that you are applying to live on campus. Room and board will be based on actual time living on campus. Your work or internship supervisor's signature is required to verify employment and/or internship hours for credit.

Dates requested for on-campus housing: _____ to _____

Supervisor's Signature _____ Title _____

- A. The premises will be used by the student solely for residential and educational purposes.
- B. Residents are expected to exercise reasonable care in the use of the facilities in the residence halls in keeping with health, safety, and maintenance standards, to know and follow Meredith College policies.
- C. Authorized college personnel, including but not limited to the Director of Residence Life, the Dean of Students, Residence Directors and Security officers may enter student rooms at any time to ensure that college policies are being upheld
- D. It is the policy of the college to assign roommates without regard to race, color, national origin, religion, or disability.
- E. This application and contract is for the summer terms a student indicates above. If the student later cancels her room and board for a session, she may be credited the amount of only the meal plan.
- F. Summer residents are required to move out of the residence hall within 24 hours after the session ends.

Signature _____ Date _____

For office use only:

Billed \$ _____ Sent to Acct. _____ by _____

Billed \$ _____ Sent to Acct. _____ by _____

Billed \$ _____ Sent to Acct. _____ by _____