



WEST TEXAS A&M UNIVERSITY DEPARTMENT OF RESIDENTIAL LIVING

APPLICATION FOR HOUSING

PLEASE PRINT OR TYPE ONLY

Buff ID#: _____

Date: _____ Name: _____
(last) (first) (M.I)

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

E-mail Address: _____

Driver's License No.: _____ Sex: _____ Age: _____ Phone: (_____) _____

College Classification: _____ 1st Semester Freshman _____ Junior
(Please Check One) _____ 2nd or More Semester Freshman _____ Senior
_____ Sophomore _____ Graduate

Parent or Guardian Name: _____ Phone: (_____) _____

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

Semester Applying for: (fill in the year of all that apply)

Fall Semester 20____ Spring Semester 20____ Summer Session I 20____ Summer Session II 20____

Roommate Preference: _____ Hall Preference: _____
(Both must request each other and space must be available) (You may indicate more than one hall)

Male halls—Guenther, Jones Female halls—Cousins, Cross, Shirley, Stafford Coed halls—Conner, Jarrett, Buff, Centennial

***ALL RESIDENCE HALLS ARE COMPLETELY SMOKE-FREE (INCLUDING ALL RESIDENT ROOMS).**

If possible, rooms are assigned on the basis of student requests. In the absence of requests, the assignment will be made at random. All applications are received and assigned without regard to race, color or national origin. Attach any requirement to the application that require special attention by the Office of Residential Living.

Rooms are contracted for the academic year (fall and spring), spring only, or for either or both summer sessions. **Room deposit is \$100.** Should a refund be desired, the student must notify the Office of Residential Living in writing by **Aug. 1** for the fall semester, **Dec. 15** for the spring semester, **May 15** for the first summer session and **June 15** for the second summer session. Driver's license state and number are required on all payments made by check. The only instance in which the University will refund a deposit after these dates is if the student is not admitted to the University for academic reasons. Deposits submitted after deadline dates will be forfeited in the event of a cancellation. The deposit is separate and apart from any financial aid for scholarship received.

RETURN APPLICATION WITH DEPOSIT ENCLOSED TO: RESIDENTIAL LIVING
WTAMU BOX 60878
CANYON, TEXAS 79016-0001

ROOM DEPOSIT IS \$100—PAYMENTS BY CHECK MUST INCLUDE DRIVERS LICENSE STATE AND NUMBER ON FRONT OF CHECK

With few exceptions, state law gives you the right to request, receive, and correct information about yourself collect by this form.

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(office use only)

Name: _____ Buff ID: _____

Hall: _____ Room: _____ Semester Effective: _____