

Valparaiso University Housing Agreement

Note: This agreement is a binding document, which obligates a student to live in University residence halls for the entire academic year or remaining portion thereof. The Agreement may not be canceled at any time with the exception of a student's graduation, total University withdrawal or participation in approved off-site study programs.

NAME _____

CURRENT LOCAL ADDRESS _____

PHONE (_____) _____
(CITY, STATE, ZIP)

MALE

DATE OF BIRTH:		
MONTH	DAY	YEAR

STUDENT I.D. NUMBER

FEMALE

ACADEMIC MAJOR(S) _____

HOME ADDRESS _____
Street Address

City _____ State _____ Zip Code _____

HOME PHONE (_____) _____

PLEASE CHECK ALL THAT APPLY:

- I USUALLY LISTEN TO MUSIC WHILE STUDYING I AM AN "EARLY MORNING" PERSON
- I AM INTERESTED IN LIVING WITH A STUDENT FROM ANOTHER COUNTRY I AM A "LATE NIGHT" PERSON

Preferred home country or region of international roommate:

REGULATIONS

1. APPLICATION: If the student has an active housing deposit on file, this form must be submitted to the Office of Residential Life by the application deadline. Students without an active deposit must complete this form and return it to the FINANCE OFFICE with a \$100.00 Housing Deposit by the application deadline. Checks should be made payable to Valparaiso University. The \$100.00 deposit may not be taken from financial aid awards.

2. ASSIGNMENTS: The University will endeavor but cannot guarantee to assign space according to the preference indicated. Assignments are made without regard to race, color, or national origin. The University does not guarantee space in the case of deposits received after the housing application deadline.

3. LENGTH OF AGREEMENT: The Housing Agreement is a binding contract which obligates the student to live in University-operated residence halls for a full academic year or remainder thereof, exclusive of vacation periods. Early cancellation of the agreement could result in additional fees.

4. REFUNDS: In case of cancellation of room reservations refunds will be made as follows:
(a) 100% if written notice is given to the Office of Residential Life ON or BEFORE the application deadline for fall, or November 15 for Spring Semester.
(b) 50% if WRITTEN NOTICE of cancellation is given to the Office of Residential Life between the application deadline and June 1 for the Fall Semester or December 1 for the Spring Semester.
(c) No refund if notice is received after June 1 for the Fall Semester or December 1 for the Spring Semester.

THIS AGREEMENT MAY NOT BE CANCELED AFTER JULY 1 / DECEMBER 31 unless a student withdraws from the University.

AGREEMENT

I hereby certify that I understand and accept University housing regulations concerning assessments and refunds, and that I will comply with University regulations found in the Terms and Conditions for Residence Hall Housing, University Catalog, Student Guide to University Life, and other official publications.

SIGNATURE OF STUDENT _____

OFFICE USE ONLY:

DATE _____

BUILDING PREFERENCE

	1 ST Choice	2 ND Choice	3 RD Choice
807 MOUND ST	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ALUMNI HALL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BRANDT HALL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GUILD HALL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LANKENAU HALL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MEMORIAL HALL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SCHEELE HALL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WEHREBERG HALL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
APARTMENTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ROOMMATE PREFERENCE (S)

- _____
- _____
- _____

SINGLE ROOMS

If you prefer a single room, please check one of the boxes below. There is an extra charge for single rooms. Failure to receive a single room does not absolve a student of any obligations inherent in signing this Housing Agreement.

- I request that the Office of Residential Life reassign me to a single room if one becomes available IN ANY HALL.
- For women, please check if you DO NOT wish to be reassigned to Scheele Hall.
- I request that the Office of Residential Life reassign me to a single room, but only in the event one becomes available in the following halls (Please list):

Please complete the "ROOMMATE PREFERENCE" section above in the event you are not placed in a single room.

MEDICAL ACCOMMODATIONS

If you have any requests for special need or disability accommodations that need to be considered, please list them below. Medical requests must have the appropriate documentation attached or on file with the Office of Residential Life. Students also may be required to meet with the University Physician, or other University offices.

THE UNIVERSITY RESERVES THE RIGHT TO MAKE CHANGES IN RESIDENCE HALL ASSIGNMENTS IF NECESSARY FOR THE MOST EFFECTIVE ACCOMMODATION OF THE STUDENT BODY.