

RANKEN

TECHNICAL COLLEGE

RESIDENTIAL LIFE

STUDENT HOUSING APPLICATION

(PLEASE PRINT ALL INFORMATION)

STUDENT INFORMATION			
Last Name	First Name	M.I.	Date
Street Address		Apartment/Unit #	
City	State	Zip	
Cell Phone (student)	Home Phone	Work Phone	
Email Address 1	Email Address 2	Gender:	
Social Security #	Date of Birth	Country of Birth	
During the semester for which I <input type="checkbox"/> 1 st Semester <input type="checkbox"/> 2 nd Semester <input type="checkbox"/> 3 rd Semester <input type="checkbox"/> 4 th Semester <input type="checkbox"/> 5 th Semester or more			
Occupancy to begin: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Mid-Year <input type="checkbox"/> Summer Year _____		Program you are enrolled in at Ranken:	
Do you intend to apply Financial Aid toward the cost of housing if it is an option? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to live in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Have you ever been convicted of a felony or misdemeanor? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, please explain:			
Applicants who have been convicted of or plead guilty to a misdemeanor or felony may be required to go through an interview process to determine admittance to the residence hall. The Director of Residential Life will make all final decisions regarding admission to the residence hall and may impose conditions on a student's admission. Failure to list felony or misdemeanor convictions on the application will result in non-acceptance or dismissal from Ranken housing.			

EMERGENCY CONTACT INFORMATION			
Parent/Guardian Full Name		Address (Street, City, State, Zip)	
Home Phone	Cell Phone	Work Phone	
Other Emergency Contact		Address (Street, City, State, Zip)	
Home Phone	Work Phone	Cell Phone	

HEALTH INSURANCE INFORMATION		
All residents are required to have health insurance while living on campus. If you do not have health insurance a resource will be sent to your Ranken email account.		
Do you currently have health insurance or are you currently covered under a parent/guardian's plan? YES <input type="checkbox"/> NO <input type="checkbox"/>		
If yes, name of insurance provider:	Name of primary policy holder:	Policy number:

ROOM, MEAL & LAUNDRY PLAN PREFERENCE	
<p>Please select <u>one</u> room preference from the following options. There are no guarantees room preferences will be honored:</p> <p style="text-align: center;">Academic Year & Spring Semester</p> <p>Shared Room Options</p> <p><input type="checkbox"/> TYPE C - Double unit with one bathroom (\$1850.00 per semester)</p> <p><input type="checkbox"/> TYPE D - 2-bedroom apartment with one bathroom (\$2575.00 per semester)</p> <p>Single Room Options (All \$2875 per semester)</p> <p><input type="checkbox"/> TYPE A - Single unit with one bathroom</p> <p><input type="checkbox"/> TYPE B - Single unit with shared bathroom</p> <p><input type="checkbox"/> TYPE E - Shared apartment with kitchen and one bathroom</p> <p><input type="checkbox"/> TYPE F - 4-bedroom apartment with kitchen and two bathrooms</p> <p>Internship Housing (\$925.00 per 8wks of semester)</p> <p><input type="checkbox"/> TYPE C - Double unit with one bathroom (All other room types are full price)</p> <p>Mid-Year Housing (\$1200 for Mid-Year)</p> <p><input type="checkbox"/> TYPE C - Double unit with one bathroom (December 1-February 28 does not include Winter Break)</p> <p>Summer Semester (\$1200 for Summer)</p> <p><input type="checkbox"/> TYPE C - Double unit with one bathroom</p>	<p>Please select <u>one</u> meal plan option from the list below. All students living on campus are required to purchase a meal plan.</p> <p>Academic Year & Spring Meal Plan</p> <p><input type="checkbox"/> Meal Plan Option A \$800 per semester plan</p> <p><input type="checkbox"/> Meal Plan Option B \$900 per semester plan</p> <p><input type="checkbox"/> Meal Plan Option B \$1,100.00 per semester plan</p> <p>Internship, Mid-Year and Summer Meal Plan</p> <p><input type="checkbox"/> \$400 per semester</p> <p>The meal plan is a declining balance system, meaning the cost of each meal purchased is deducted from your total meal plan balance.</p>
<p>Laundry Plan: The cost for the laundry plan is \$75 academic year and \$35 for the mid-year, spring or summer semester which provides unlimited access to the laundry room. The cost is deducted from your meal plan. Would you like to register for the Laundry Plan? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	

Walker Hall has ADA handicap accessible rooms. Students have the obligation of notifying the Residential Life Office regarding the nature of their disability and need for accommodation. Documented proof of a disability may be requested in some cases. If you have a disability and require a handicap accessible room, please check the following box: TYPE A - Single unit with one bathroom
Please explain your disability and your accommodation requests in the space provided:

STUDENT PROFILE

Please complete the personal data section completely and honestly. Your responses will assist the Residential Life Office in determining a roommate or roommates that you may be most compatible with. Listing a preferred roommate or roommates does not ensure that you will room with that person or persons. If you list the person or persons, you would like to room with, and they list you on their application than chances are greater that you will get your preference. If you write in a preferred roommate and that person does not list, you as a preference than your request will not be granted.

1. Do you have a specific person or persons you would like to have as a roommate? Yes No

If yes, please list the person or persons here: _____

If no, what qualities would you like in a roommate _____

2. Would you mind having a roommate who has visitors on a regular basis? Yes No

3. Would you prefer to room with someone that is in your major program? Yes No

4. Do you smoke? Yes No

5. Would you mind having a roommate who smokes? Yes No

6. Do you get out of bed early in the morning (before 7 a.m.)? Yes No

7. Do you prefer to live with someone that gets up early in the morning? Yes No

8. Do you go to bed late most nights (after 11 p.m.)? Yes No

9. Do you prefer to live with someone that stays up late? Yes No

10. Do you require complete silence when you are sleeping? Yes No

11. Do you mind low level noise while you are sleeping? Yes No

12. What types of music do you listen to? (Check your top three)

Hip Hop/Rap

Rhythm & Blues

Reggae/Ska

Alternative

Jazz

Christian/Gospel

Classic Rock

Hard Rock

Pop/Top 40

Easy Listening/Classical

Country

Metal

Other _____

13. How do you prefer to study? Alone With Others

14. When I study, I:

Am able to tune out most noises and am not easily distracted

Like low level background noise or music

Require absolute quiet

15. I am most comfortable in my room when:

It is neat and everything is where it belongs

It is clean but there it can get cluttered

It doesn't matter how it looks as long as it is clean

16. How comfortable are you with sharing your possessions?

I am comfortable with letting others use or borrow my things

I have to trust the person before I let them use or borrow my things

I am very uncomfortable with allowing others to use or borrow my things

17. Which of the following best describes your personality?

Outgoing and social

Quiet and reserved

18. What are your main hobbies and interests? _____

19. Are there any other special considerations you would like to mention? _____

Ranken Technical College does not discriminate based on race, color, religion, national origin, ancestry, gender, sexual orientation, disability, status as disabled veteran or veteran.

BACKGROUND CHECK RELEASE

By signing this section, I authorize the Residential Life Office at Ranken Technical College to conduct a background check on my behalf. I also authorize the release of my academic and behavioral records on file at Ranken Technical College to the Director of Residential Life for examination. I understand that the initial approval process for housing is pending based on inspection of the background check and academic and behavioral records. I understand that the purpose of these procedures is to ensure the safety and well-being of all residence hall residents and Ranken employees that will be working in the residence hall. I hereby release the College, its employees and officials from any liability for the release of information requested above. I understand that failure to sign this release will result in non-acceptance to Ranken housing.

Signature (If student is 18 years or older) _____ Date _____

Parent/Guardian Signature (If student is younger than 18) _____ Date _____