



## HOUSING APPLICATION/DEPOSIT FORM *cont.*

9. All Hilbert students living on campus must have health insurance coverage, proof of immunization, and a physical prior to moving into Campus Housing.

Insurance company: \_\_\_\_\_

Group ID: \_\_\_\_\_

Coverage through:  Yourself  Parents

Other (please specify): \_\_\_\_\_

Please attach a photocopy of your Health Insurance card.

10. Have you ever been convicted of a felony or a misdemeanor (except a traffic violation)?

No  Yes

If yes, please include a letter of explanation with this application.

If you are under 21 years of age, it is illegal for you to consume alcohol anywhere on the Hilbert College campus, including the Residence Hall and Apartments. Violations will result in disciplinary actions.

*I have read and understand the items and conditions as outlined in this Housing Application and agree by signing below to abide by these terms and conditions. Resident students will not be allowed to move in the Residences until all financial aid is credited and their account is paid in full or a payment plan is approved. All balances are payable by the published due date on the invoice. Failure to respond by the payment due date will result in a late fee and possible removal from the Residences. By signing this application there is no guarantee that I will be placed in the Residences. In the event that I do not get a room assignment, my housing deposit will be refunded in full. I also understand that failure to comply with Hilbert College policies could lead to disciplinary actions and/or termination of residency privileges. I understand that this contract is binding for the entire academic year and if I break this contract, I will be assessed a fee of \$100.*

This application is binding for the entire 2009–2010 academic year.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian signature (if student is under 18) \_\_\_\_\_ Date \_\_\_\_\_

### FOR OFFICE USE ONLY

Date deposit received \_\_\_\_\_ Amount \$ \_\_\_\_\_ Check # \_\_\_\_\_ Cash: \$ \_\_\_\_\_

Credit Card Type \_\_\_\_\_ Credit Card # \_\_\_\_\_

Received by: \_\_\_\_\_

### BILLING INFORMATION:

Assigned room type:

Meal Plan:  19 meal  14 meal  10 meal  5 meal

Trinity:  Double Room  Triple Suite

St. Joseph Hall:  Single  Double

Apartment:  On campus  Off campus

### FOR MORE INFORMATION:

Director of Residence Life: (716) 926-8933 • [jlanker@hilbert.edu](mailto:jlanker@hilbert.edu)