



ANNUAL LODGING APPLICATION

Lodge Office: (530) 938-5237

Fax: (530) 938-5524

This form is an application only.

It is not a License/Contract and alone will not reserve a bedspace

Step 1 - Mail application with \$150 fee

Step 2 - Lodge staff will process, then e-mail a License/Contract to the applicants email address provided (COS email is preferred).

Step 3 -Payment plan is developed based on Contract/License choices and student fees. Payment plan must be completed by both student and cosigner before housing can be confirmed.

Name _____ Gender Male Female
Last First Middle Initial

COS Student Identification Number _____ Birth Date _____

Contact Information Applying for (check one) Academic Year 2017-2018 Spring 2018

Address _____ Cell Phone _____ Alt. or Cosigner Phone _____

City _____ State _____ Zip _____ Student's Email Address _____

Adult Cosigner required-Name _____ Email Address _____

What is your major? _____ Have you applied for Financial Aid? Yes No

Do you need special accommodations to meet any disabilities? Yes (Contact Lodge office) No

Are you planning to participate in extra-curricular activities (sports/performing arts/etc.)? Yes No

If so, please list: _____

Would you like to share your contact information (phone/email) with a prospective roommate? Yes No

If there is a person you have coordinated being roommates with please list their name(s) here.

Lodging staff does not guarantee this roommate match will happen; our staff makes every effort to meet these requests.

LIVING HABITS - Please check all that apply

Sleeping Habits	Cleanliness	Study Habits
<input type="radio"/> In bed Before Midnight	<input type="radio"/> Generally Neat & Clean	<input type="radio"/> Study in room w/quiet
<input type="radio"/> In Bed After Midnight	<input type="radio"/> Generally Messy	<input type="radio"/> Study in room w/ music
<input type="radio"/> Early Riser <input type="radio"/> Late Sleeper	<input type="radio"/> Cleanliness Doesn't Matter	<input type="radio"/> Study in Library
Preferences in Music	Roommate Preferences	Are you a Smoker?
<input type="radio"/> Country <input type="radio"/> Rap	<input type="radio"/> Athletic <input type="radio"/> Outgoing	<input type="radio"/> Yes <input type="radio"/> No
<input type="radio"/> Classical <input type="radio"/> Alternative	<input type="radio"/> Quiet <input type="radio"/> Same Major	Interested in the Quiet Wing?
<input type="radio"/> Rock/Heavy <input type="radio"/> Pop	<input type="radio"/> Studious	<input type="radio"/> Yes <input type="radio"/> No

Have you ever been convicted of, or plead guilty or no contest to a felony or misdemeanor crime? Yes No
(A "Yes" answer does not automatically disqualify you from housing). In your explanation identify the type of crime and the circumstances surrounding the incident.

Explain _____

Do you currently have a temporary restraining order on file with the Court against any individual? Yes No
(If yes, please provide documentation or see a Lodge Supervisor).

\$150.00 contract origination, cleaning and activity fee* must accompany this application. This \$150 Fee is refundable only if: 1)You cancel by August 1, 2017, 2)You are not admitted to the College, or 3)The Lodges are fully occupied at the time this application is received. Upon receipt of your Activity Fee and application, the Lodge Office will send you a Lodge Contract that must be signed and returned to confirm your reservation.

I understand that dishonest, untrue or inaccurate or incomplete information submitted on this application or other signed document is grounds for immediate revocation of the housing contract and/or student discipline, including but not limited to, suspension or expulsion. I understand College of the Siskiyous reserves the right to revoke/refuse housing to students or applicants pursuant to established COS Board of Trustees policies and/or violations of the lodging license and contract. This application for housing is incorporated by reference and hereby made a part of the lodging license and contract.

Signature of Applicant: _____ Date: _____

IF APPLICANT IS UNDER 18 YEARS OF AGE, PARENT OR GUARDIAN MUST SIGN

Signature of Parent/Guardian: _____ Date: _____

**Please make your check payable to College of the Siskiyous and mail to 800 College Avenue, Weed, CA 96094*