



**UWI, Mona- Western Jamaica Campus
Hall of Residence**

10 Queens Drive & 7 Kent Avenue,
Montego Bay, St James

Telephone Number: 971-4783 | Fax Number: 971-1283

APPLICATION TO RESIDE IN HALL OF RESIDENCE FOR SUMMER

General Information			
Student ID Number:		Sex: <i>Male</i> <input type="checkbox"/> <i>Female</i> <input type="checkbox"/>	
Date of Birth:			
Name:			
	Last Name	Middle Name	First Name
E-mail Address:			
Telephone Number:	Mobile (Digicel):	Mobile (Flow):	Landline:
Permanent Address:			
Term Address:			
Nationality:			
Student Residential Status	Currently Residing in Hall <input type="checkbox"/> Off- Campus <input type="checkbox"/>		
State reason(s) you wish to reside in Hall			
Period you would like to stay in Hall	<i>DD/MM/YY- DD/MM/YY</i>		
Room Preference:	Buccaneer <input type="checkbox"/> 600- Block <input type="checkbox"/>		

Academic Information

Level:	Undergraduate <input type="checkbox"/> Graduate <input type="checkbox"/>
Year Of Study	Year 1 <input type="checkbox"/> Year 2 <input type="checkbox"/> Year 3 <input type="checkbox"/> Final Year <input type="checkbox"/> Other _____
Degree Programme:	
Enrolment Status	Part-Time <input type="checkbox"/> Full-Time <input type="checkbox"/>

I affirm that the information provided is true and correct and that it is my intention to make a positive contribution to life on the Hall of Residence and the University. I agree to abide by the rules and regulations and realize that failure to do so may result in expulsion from the Hall of Residence and/or other sanctions.

Applicant's Signature: _____ **Date:** _____