#### THE UNIVERSITY OF THE WEST INDIES MONA CAMPUS

# APPLICATION TO RESIDE IN CHANCELLOR HALL FOR SUMMER 2017

## Instructions:

- a. It is very important that you complete ALL QUESTIONS.
- b. THIS FORM MUST BE COMPLETED AND RETURNED TO THE STUDENT SERVICES AND DEVELOPMENT MANAGER'S OFFICE.
- c. Tick wherever appropriate.

#### General Information for Applicants:

- 1. Applicants with balances will not be considered
- 2. Priority will be given to the following applicants:
  - a. Finalizing students
  - b. Medical students
  - c. Students sitting two or more courses
  - d. Consented returning students
  - e. Students sitting year-long courses
  - f. Students with EXPRESSED special circumstances
  - g. Graduate students

## THANK YOU FOR YOUR CO-OPERATION.

1.	Name:		
	Surname	First Name	Middle Name
2.	ID Number:	3. Faculty:	
4.	Current Academic Status:	Full Time ( )	Part Time ()
		Major:	Level:
5.	Summer Courses (Please provide documentary evidence of registration)		
	i		
	ii		
	V		
6.	Territory:		
7.	Home Address:		
	Tel. No. (Home)		
		(Cell.) (Office)	
	Email Address:		
8.	Present Hall of Residence a	nd Block &Room #	

- 9. Do you hold an Official Post:
  - In Hall\_\_\_\_\_\_ ii. On the Guild Council\_\_\_\_\_\_ i.

If so, please state the title of the post:\_\_\_\_\_

10. VERY IMPORTANT: State your reason for wishing to reside in Hall. Please be specific:

What dates do you wish to be accommodated? Please be specific - that is, start date and 11. end date:

12. Do you have outstanding balances for Hall fees/Tuition fees? Yes () No () \_\_\_\_. (Be reminded that all outstanding If yes, how much \$\_\_\_\_\_ fees must be settled prior to consent for residence.)

What year? \_\_\_\_\_

What year? \_\_\_\_\_

What year? \_\_\_\_\_

- I belong to the following category of students: 13. What year? \_\_\_\_\_
  - Medical Sciences () a.
  - b.
  - C. d.
  - Graduate student () Finalizing student () Commuting student () Authorized summer programme () e.
- 14. I have lived in Chancellor Hall for \_\_\_\_\_\_ years and \_\_\_\_\_\_ months
- I have lived in \_\_\_\_\_ 15. \_\_\_\_\_ Hall for \_\_\_\_\_years and \_\_\_\_\_months (other Hall)

What method of payment will you use?\_\_\_\_\_

For non-Chancellorites - Student Services and Development Manager's recommendation/comments (must be accompanied by signature and stamp):

NB: Payment must be made for at least one month in advance.

FEE: \$766.60 PER DAY.

Keys must be handed in to the Operations Supervisor to terminate accumulation of daily charges.