

OFFICE USE ONLY

\$20.00 Application Fee _____ \$150.00 Deposit _____ Vacc. _____ Meal Plan _____ Building _____

Receipt _____ No Money _____ Waiting List _____ MP List _____ Room Number _____

**OKLAHOMA PANHANDLE STATE UNIVERSITY
APPLICATION FOR HOUSING**

OPSU Housing

P.O. Box 430, Goodwell, OK 73939

Phone: (580) 349-1360, Fax: (580) 349-2302

Questions: housing@opsu.edu

Residency to begin (Year): Fall _____ Spring _____ Summer _____

Name _____ SSN _____ Birth date _____ Age _____
Legal Last Name Legal First Name M.I.

Mailing Address _____ City _____ State _____ ZIP _____

Home phone _____ Cell phone _____

Email Address _____ Gender: Male Female

Parents or Guardians _____ Mailing Address _____

City _____ State _____ ZIP _____ Home Phone _____ Work Phone _____

Emergency contact: _____ Home phone _____ Work phone _____

List Disabilities or Medical Conditions _____

Major Course of Study: _____ Status (Circle one): Freshman Sophomore Junior Senior

List hobbies, interests, or extracurricular activities: _____

I typically wake up at _____ a.m./p.m. and go to bed at _____ a.m./p.m. Do you smoke? YES or NO

Are you a scholarship athlete? YES NO If yes, list sport _____

Please rank your choice of living areas in order of your preference: (1 being 1st preference)

_____ Holter Hall _____ Aggie Apartments
_____ Field Hall (Males Only) _____ Aggie Annex

Holter/Field Occupancy: (Circle one) Single Double Bunk Bed Suite

Aggie Annex Occupancy: (Circle one) 2 residents 3 residents Room Occupancy: (Circle one) Single Double

****Actual reservations and room assignments are made on the basis of dated receipt of \$20 application fee and \$150 deposit. The Housing Office cannot guarantee your first choice but will make every effort to honor your preference. The university reserves the right to place all students.**

Meal Plan Choice: (circle one) No Meal Plan 5 meals/week 10 meals/ week 15 meals/ week 20 meals/week

****All Holter/Field Hall residents are required to be on a 10, 15, or 20 meal plan. If a meal plan is not selected you will be put on the 20 meal plan. No refund is made for meals not eaten. Meals are non-transferable. Students are to abide by the rules and regulations of dining hall.**

Please list preferred roommates even if you have requested single occupancy.

- 1) _____
- 2) _____
- 3) _____

Alternate Choice _____

CONDITIONS OF CONTRACT

1. RATES AND PAYMENTS

- a) Rates are defined in the "Housing Rate Sheet," which is incorporated into this contract by reference. Room and board rates are subject to change at the direction of the Board of Regents.
- b) The \$150.00 deposit and \$20.00 application fee is due when the contract is returned. The deposit will be credited to your account when all conditions of the contract are fulfilled.
- c) Payments made under this contract cover Residence Living and Dining Services during the official university classes. School breaks not covered under this contract include, but are not limited to, Thanksgiving, Christmas and Spring Break.
- d) Any late payment is subject to a finance charge assessed by the Business Office. A hold may be placed on your official university record if your account remains delinquent.

2. ASSIGNMENT OF RESIDENCE HALL SPACE

- a) You are contracting for space within the University Residence Halls system, not for a specific Residence Hall room. The University may reassign you to a different room or Residence Hall, or the University may adjust the occupancy of your room in order to maximize space utilization; further, the University may take such action as is necessary to control the use of rooms in the event of an epidemic, disaster, or other conditions or circumstances that appear to require such control.
- b) This document becomes a legally binding contract when accepted and subscribed by the Student Affairs Office, which will normally occur at the time the completed contract and deposit are received by the Student Affairs Office. In the event of a shortage of Residence Hall space, students requesting single rooms will be paired according to classification. Freshman students will be paired first, sophomores second, juniors third, and seniors last. After that, contracts will be accepted for assignment on the basis of the date the contract and deposit are received in the Student Affairs Office.

3. MEAL PLAN ASSIGNMENT

- a) All Residence Hall occupants are required to purchase a meal plan as specified in the "Residence Hall Rate Sheet."
- b) Students are allowed to change their meal plan once each semester. Decreases in the meal plan may only occur during the first 10 days of a semester.

4. TERMINATION OF CONTRACT

a) Contract Termination Prior to the First Day of Class:

- i) **Full Refund** - Deadline: July 15th for Fall; December 15th for Spring. Your entire deposit will be refunded if your written notice of termination is received by the Student Affairs Office on or before July 15th for the Fall Semester, or December 15th for the Spring Semester.
- ii) **Partial Refund** - Deadline: August 1st for Fall; January 2nd for Spring. \$100 of your deposit will be retained by the University if your written notice of termination is received between July 16th and August 1st for the Fall Semester or between December 16th and January 2nd for the Spring Semester. The \$100 will be retained for a broken contract fee.
- iii) **No Refund** - After August 1st for the Fall semester and January 2nd for the Spring semester. The entire deposit of \$150.00 will be retained by the University as a broken contract fee.

b) Contract Termination On or After the First Day of Class:

- i) If you are enrolled in the University and you terminate your room and/or meal contract in writing on or after the first day of classes, the following applies:
 - a) The \$150 deposit will be retained by the University (see Residence Hall Rate Sheet), and
 - b) If contract is terminated on or before the 10th day of class there will be prorated charges for room and board.
 - c) Full room and board charges for the semester will apply if you move from the dorm or withdrawal from school after the 10th day of class.
 - d) If you do not check into your assigned Campus Housing by the first Friday of a semester, the University may, at its discretion, terminate this contract and charge you according to the above conditions.

5. If you terminate this contract because you are not enrolled and you re-enroll during the term of this contract, you agree to reassume the obligations of this contract.

6. RULES AND REGULATIONS

- a) As a condition of this contract, you agree to comply with all University rules, regulations, and policies. The OPSU Student Handbook and other posted and/or distributed rules and regulations are incorporated herein by reference. This includes those rules and regulations now in effect, and rules and regulations that are amended or enacted during the term of this contract. If you violate University and/or Residence Hall regulations, create undue disturbances for other residents, or unreasonably withhold your cooperation from other students or from Residence Hall staff, you may be dismissed from the hall. Also, at the discretion of the Dean of Student Affairs, you may be recommended for dismissal from the University. In this event, you would still be responsible for this contract.

The student and the University hereby agree to all terms, conditions, and provisions set out in this contract and in the Student Handbook and Residence Life Handbook and the OPSU General Catalog.

Signature

Parent's Signature if student is 17 years of age or less

Date

This institution, in compliance with Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, sections 503 and 504 of the Rehabilitation Act of 1973, the Americans With Disabilities Act of 1990, and other federal laws and regulations, does not discriminate on the basis of race, color, national origin, sex, age, religion, physical or mental disability, or status as a veteran in any of its policies, practices, or procedures. This includes, but is not limited to, admissions, employment, financial aid, and educational services. Inquiries concerning the application of these programs should be made to the Vice President for Academic Affairs, Oklahoma Panhandle State University, Goodwell, OK 73939, (580) 349-2611, or the Office of Civil Rights, U.S. Department of Education, 8930 Ward Parkway, Suite 2037, Kansas City, MO 64114, (816) 268-0550.

Updated 11/17/11

In Compliance with Oklahoma Statutes, Title 70 83243

Certification of Meningococcal Compliance

Oklahoma Statutes, Title 70 83243, requires that all students who are first time enrollees in any public or private postsecondary educational institution in this state and who reside in on-campus student housing shall be vaccinated against meningococcal disease. Institutions of higher education must provide the student or the student's parents or other legal representative detailed information on the risks associated with meningococcal disease and on the availability and effectiveness of any vaccine.

The statute permits the student or, if the student is a minor, the student's parent or other legal representative, to sign a written waiver stating that the student has received and reviewed the information provided on the risks associated with meningococcal disease and on the availability and effectiveness of any vaccine, and has chosen not to be or not to have the student vaccinated.

Student's Name: _____

Institution: Oklahoma Panhandle State University _____

Birth date: _____ Term/year of first enrollment: _____

Social Security Number or Student ID: _____

- 1.) **I have received and reviewed detailed information on the risks associated with meningococcal disease, and**
- 2.) **I have received and reviewed information on the availability and effectiveness of any vaccine (against meningococcal disease), and**
- 3.) **I have been vaccinated or I choose not to be vaccinated* against meningococcal disease.**

Signature: _____ Date: _____

When the student is under 18 years of age, the following must also be completed:

As the parent, guardian or other legal representative, I certify that the student named above is a minor and that I have received and reviewed the information provided and that I have chosen not to have the student vaccinated against meningococcal disease.

Signature: _____ Date: _____

*With this waiver, I seek exemption from this requirement. I voluntarily agree to release, discharge, indemnify and hold harmless Oklahoma Panhandle State University, its officers, employees and agents from any and all costs, liabilities, expenses, claims, demands, or causes of action on account of any loss or personal injury that might result from my decision not to be immunized against meningitis.

This form must be returned with the Housing Application