ROGERS STATE UNIVERSITY

FAMILY HOUSING APPLICATION

1. I am applying for the: ❑ Fall, August 20____ ❑ Spring, January 20____ ❑ Summer, June 20____

2. Applicant's Full Legal Name

_____
Last First Middle Suffix

3. Gender

❑ Female
❑ Male

4. Student ID Number _____ /_____

5. University Standing ❑ Freshman ❑ Sophmore ❑ Junior ❑ Senior

6. Birth Date and Age _____ /_____ /_____ Age: _____
Month Day Year

7. Permanent Address

_____
Street City State Zip

8. Contact Information

_____ _____
Phone Cell Phone

9. Martial Status

❑ Single
❑ Married:_____
Spouse's Name

_____ /_____ /_____ _____ /_____ /_____ ❑ Female ❑ Male
Social Scurity Number Month Day Year

10. Children
A total of three family members can live in one unit. No children 10 years or older.

❑ Children:_____
Child's Name

_____ /_____ /_____ _____ /_____ /_____ ❑ Female ❑ Male
Social Scurity Number Month Day Year

_____
Child's Name

_____ /_____ /_____ _____ /_____ /_____ ❑ Female ❑ Male
Social Scurity Number Month Day Year

11. How long do you plan on residing with us? ❑ Academic Year ❑ Full Year ❑ Spring Semester ❑ Summer

12. Have you ever been convicted of a felony (as an adult)? ❑ Yes ❑ No If yes, please write a description of the circumstances and attach it to this application. Please include full legal name, social security number, date of birth, and current mailing address.

13. Have you ever been required to register as a sex offender (as an adult)? ❑ Yes ❑ No If yes, please identify the year and state of your registration and attach it to this application.

14. Applicant's Signature

I certify that the information provided as a part of this application is true to the best of my knowledge. I authorize and permit bona fide representatives of Rogers State University to verify all information provided herein and waive privacy rights permitted by law when such waiver is required to verify information provided herein. I understand that falsification or misrepresentation is sufficient for termination, any consideration of me for residence, and dismissal of residence. Furthermore, I agree to comply with the rules and regulations of Rogers State University provided that such compliance does not contraverse those rights and privileges afforded me by law, regulation or policy.

_____ _____
Signature Date

Mail completed application and $200 deposit check to:

RSU Residential Life
c/o Kyla Short
Rogers State University
1705 W. Will Rogers Blvd.
Claremore, OK 74017

For more information on Family Housing please call, (918) 343-7789.