Fontaine Hall
Residence Life Application
HOUSING DEPOSIT

For Office Use Only
Assignment: _____

Note 1: Fontaine Hall is not owned by Columbus State University, but rather privately owned; however the owner has retained CSU Residential Services to manage the occupancy as if it were a part of the CSU Residence Life Program.

The undersigned agrees that CSU Residence Services may share information and documents with owner _____ *INITIAL*

I AM APPLYING FOR: ( ) Summer 2013 ( ) Fall 2013 ( ) Spring 2014

Have you previously lived on campus at Columbus State university No ____ Yes ____ From_____ To _____

STUDENT INFORMATION

Applicant: _____ Date of Birth:_____ ☐ Male ☐ Female
(Last) (First) (Middle)

Home Address: _____

City: _____ State: _____ Country: _____ Zip: _____

Home Phone: (____)_____ **CSU ID#:** _____

Cell Phone: (____)_____ Email: _____

Are you presently enrolled at Columbus State University? Yes _____ No _____

Classification for semester applied: Freshman _____ Sophomore _____ Junior _____ Senior _____ Graduate _____

Academic Major: _____ Scholarship: Yes_____ No _____ Type _____

Have you been convicted of a felony? Yes _____ No _____ (If yes, please attach explanation.)

EMERGENCY AND MEDICAL INFORMATION

Emergency Contact: _____ Relationship: _____

Home Address: _____

City: _____ State: _____ Country: _____ Zip: _____

Home Phone: (____)_____ Cell Phone: (____)_____

Do you have any health problems, conditions or limitations that we should be aware of? Yes_____ No _____

Describe: _____

Doctor: _____ Phone #: (____)_____

Address: _____ City: _____ State: _____ Zip: _____

I have read and agree to abide by the Residence Life Contract.

Student Signature: _____ Date: _____

Parent or Guardian Signature: _____ Date: _____
(If student is under 18)