



Jamestown Community College Housing Application & License

Office Of Residence Life residencelife@mail.sunycc.edu 716.338.1188

Please fill out the application completely. **Please print.** Return with your \$200 non-refundable deposit (check payable to Jamestown Community College or see credit card information below) to:

Business Office
Jamestown Community College
P.O. Box 20, 525 Falconer Street
Jamestown, NY 14702-0020

Attach proof of health insurance coverage and immunizations required by JCC health services.

I am requesting a single room: Yes No Class year: Freshman Sophomore

Preference for suitemates: please list J-number and last name on back of application.

I am requesting a double room, and have a specific roommate request: Yes No

Print requested roommate's name

Note: Roommate/suitemate requests can be honored only when both parties make the request and space is available. All requests should be received by June 1.

Student's Name: _____ Student J-Number: _____

Permanent Address: _____

Date of Birth: _____ Gender: _____

Home Phone #: _____ Cell Phone #: _____ Email: _____

Housing Questions

Please note: All residence halls are alcohol- and smoke-free.

Do you prefer a roommate who is: very studious moderately studious don't care

Do you normally go to bed before or after midnight? before after

Do you belong to a varsity athletic team? yes no

Do you have an interest in a specific club/organization, i.e. ski club, computer science, etc.? yes no

Please list interest: _____

License Agreement

***Please note: once signed and submitted, the housing license is for the entire academic year. The deposit is non-refundable unless written request is made by July 1 prior to the fall semester.**

I hereby agree to pay the housing rates as they have been announced or as they may be adjusted, and I agree to abide by the terms and conditions enclosed with the application and the on-campus living policies of FSA. I understand that this license is binding for both the fall and spring semesters.

Signature (in ink)

Date

(If under 18 years of age, parent/guardian and student signatures are necessary.)

If you wish to pay the \$200 non-refundable deposit by credit card:

CREDIT CARD INFORMATION:

credit card amount _____ card expiration date _____ month _____ year card (circle one)



three-digit security code (found on back of card):

credit card number:

X _____
signature of cardholder (in ink) date