2013-2014 SCHOOL YEAR

PEARL RIVER COMMUNITY COLLEGE

HOUSING APPLICATION

DEPARTMENT OF STUDENT LIFE

(PLEASE TYPE OR PRINT)

Name _____
LAST NAME FIRST NAME MIDDLE NAME

PRCC I.D. #: _____ SS #: _____

PERMANENT (NON-PRCC) MAILING ADDRESS:

Street _____

City _____ State _____ Zip _____

E-Mail Address _____

Home Telephone _____ Cell Telephone _____

Gender (check): ☐ Male ☐ Female ☆ Date of Birth _____

Race: _____ School Term: ☐ Summer ☐ Fall ☐ Spring

Classification in Fall 2013 (check box): ☐ Freshman ☐ Sophomore

Are you a returning dormitory student? ☐ YES ☐ NO

If so, what dormitory? _____ Room # _____

I give my permission for PRCC to release my name and home phone number to my prospective roommate(s): ☐ YES ☐ NO

EMERGENCY CONTACT

_____
Emergency Contact Name

_____
Emergency Contact Relationship to Student

_____
Emergency Contact Number (1)

_____
Emergency Contact Number (2)

See Application Terms and Conditions for Details on Application Cancellation

Signature _____ Dated _____
Student

Signature _____ Dated _____
Parent or Guardian if student is under 18 years old

Accepted _____ Dated _____
Housing Operations Staff

AREA AND ROOMMATE(S) PREFERENCES

■ Preferences will be considered, however, no guarantees are made for any particular residence area, room, apartment, or roommate assignment. Room and roomate assignments are subject to change at any time.

RESIDENT HALLS

WOMEN'S

☐ Earlora Holden Hall
☐ Katherine Moody Hall
☐ Forrest Hall

MEN'S

☐ Hancock Hall
☐ Pearl River Hall
☐ Huff Hall
☐ Lamar Hall

ROOMMATE PREFERENCES

(Only mutual roommate requests will be considered)

Name: _____
Contact #: _____

Name: _____
Contact #: _____

Name: _____
Contact #: _____

Which is more important?

☐ Roommate Choice
☐ Area Choice

EXTRACURRICULAR Activities

☐ ATHLETICS
☐ BAND / PEARLS
☐ CHOIR
☐ HONORS COLLEGE

If Athletics, specify which sport _____

_____

OTHER PREFERENCES

Do you smoke or use tobacco products? ☐ **YES** ☐ **NO**

Would you object to a roomate that smokes or uses tobacco products? ☐ **YES** ☐ **NO**

■ **NOTE:** ALL campus facilities are designated "smoke free" by Mississippi Statute. Smoking is not permitted inside any campus facility including all housing rooms.

ACCOMMODATION OF DISABILITY:

■ If you have a disability as defined by the Americans with Disabilities Act and/or Section 504 of the Rehabilitation Action of 1973, and would like to request a reasonable accommodation of disability in room assignment or other aspect of College Housing, you will need to contact the college's Disability Resource Center (DRC) to follow its procedures for requestin such an accommodation so as to allow DRC to coordinate your request with Housing Operations.

PLEASE INDICATE BY CHECKING THE BOX:

☐ I will be requesting a reasonable accommodation of disability regarding Housing with the DRC

STEPS FOR SUBMITTING HOUSING CONTRACT

- Complete application and submit a non-refundable application fee of $75
- Make check payable to PRCC
- Mail application and check to:

Pearl River Community College
101 U.S. Highway 11
Poplarville, MS 39470

FOR OFFICE USE ONLY

Prepayment Amt. _____ Date Recieved _____

Processing Fee _____ Staff Initials _____