

C.W. POST CAMPUS/ LONG ISLAND UNIVERSITY

C.W. POST CAMPUS



Application for On-Campus Housing

Questions? Call Residence Life at (516) 299-2326

Applying for: Fall Spring Year _____

**** \$300 housing deposit must accompany this application****

Make checks payable to C.W. Post Campus/Long Island University.
Please place check and this form in an enclosed envelope marked - **Bursar Office**.

BURSAR STAMP	
Deposit:	_____
Waiver:	_____
Initials:	_____

NAME (please print) _____
(Last) (First) (Middle initial)

HOME ADDRESS: Street _____

City _____ State _____ Zip Code _____

HOME TELEPHONE NUMBER (____) _____ - _____ CELL PHONE #: (____) _____ - _____

E-MAIL ADDRESS _____

STUDENT'S SOCIAL SECURITY NUMBER: --

DATE OF BIRTH ____/____/____ SEX: M F

I AM A: Returning Student New Freshman Transfer New Graduate Student

PARENT'S NAME: _____

PARENT'S WORK NUMBER: (____) _____ - _____

EMERGENCY CONTACT OTHER THAN PARENT: _____ RELATIONSHIP: _____

EMERGENCY CONTACT PHONE: (____) _____ - _____

HEALTH INSURANCE REQUIREMENT: The University requires all resident students to maintain valid health insurance. All residents will be automatically billed for the university-sponsored health insurance plan on their bursar account. Students who have their own health insurance may waive this charge. This is a time-sensitive responsibility. Students must complete the waiver on or before the semester deadline date to avoid being billed for university-sponsored health insurance.

To waive the charge, visit <https://secure.visit-aci.com/enrollment/home/LIU.htm> or call 800-322-9901 and follow the instructions. Print and retain a receipt evidencing proof of compliance with the waiver provisions. FAILURE TO COMPLY ON TIME WITH THE WAIVER PROVISIONS AND MEET THE POSTED DEADLINES WILL RESULT IN THE STUDENT BEING BILLED FOR UNIVERSITY-SPONSORED HEALTH INSURANCE.

FIRE, THEFT, VANDALISM: The University will not be liable for personal items, including motor vehicles, lost or damaged by fire, theft, vandalism, water, breakage or otherwise. The University urges students to purchase student property insurance (Information about property insurance is available in the Office of Residence Life). The University will not be liable for loss or damage to vehicles. Parking and use of vehicles on University premises is at the student's own risk.

AGREED TO AND ACCEPTED: My signature below indicates that by accepting accommodations through Long Island University, I understand and agree to comply with all terms, conditions, regulations and responsibilities as described in the C.W. Post Ethos Statement and provided in the Student Handbook, Resident Student Handbook, Residence Life Housing Agreement, and all Residence Life and other University publications.

Student's Signature: _____ Date _____

Parent's Signature: _____ Date _____
(if student is under 18 years old)

OFFICE USE ONLY		
Date Received _____	Staff Signature _____	
Room Assignment _____	Mail Box # _____	Date Assigned _____

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PIONEER LIVING PLAN OPTIONS: Please select the plan of your choice

All resident students are required to participate in the University Meal Plan. If you do not select one now, Plan #1 will be automatically billed to your Bursar account. Meal Plan balances are non-refundable and non-transferable and must be used before the end of the semester. Meal Plan changes must be made in writing to the Office of Residence Life PRIOR to the start of the semester. *All students with 30 credits or less are required to select Plan 1.*

- PIONEER LIVING PLAN 1:**
This plan provides students with our 7 day Carte Blanche Continuous Dining Service. A Carte Blanche membership allows you unlimited access to Winnick Student Center's dining hall whenever it is open.
- PIONEER LIVING PLAN 2**
This plan provides students with 14 meals per week for those who eat two meals per day and purchase some snacks, throughout the week and weekend.
- PIONEER LIVING PLAN 3**
This plan provides students with 10 meals per week for those who eat two meals during the week day and some snacks.
- PIONEER LIVING PLAN 4**
This plan provides students with 7 meals per week for those who typically eat one meal per day on campus and purchase snacks during the week.

ROOM PREFERENCE: Please answer the following questions to help us make the best placement possible.

Please complete the preference information to assist us in making your room assignment. Assignments are made on a space available basis and our ability to accommodate your preferences depends on the date you submit your application. **Please note these are preferences only.** We will make every effort to accommodate your request; however we cannot guarantee that all requests will be granted. All students are therefore encouraged to submit their applications and deposits by the **May 1 deadline for the fall semester** and **January 1st for the spring semester.** Please be advised there are no single occupancy rooms available. Residence Halls are generally co-ed; floors are usually designated male or female. All residence halls on the C.W. Post campus are smoke-free. Please contact the Office of Residence Life for room rates at (516) 299-2326 or ResidenceLife@cwpost.liu.edu.

- Standard Housing.** Two, three or four residents per room; corridor-style residence hall. Residents of each wing (corridor) share a large common bathroom.
- Suite-style Housing.** Suites consist of three or four bedrooms that surround a shared living room, and shared bathroom facility.
- Ten-Month Housing.** Appropriate for all students who need housing during winter break period. Please note that there is an additional charge to reside in this hall during the break periods.
- Intensified Study Housing.** Quiet hours are in effect 24 hours a day, 7 days a week in this residence hall.

ROOMMATE REQUEST: If you have a preferred roommate or roommate preference, please complete the following. Roommate preferences can only be considered if both individuals are C.W. Post students and each student indicates his/her desire to live together. Roommate requests must be the same gender.

- I am an athlete on the _____ team and wish to be assigned with another student on my team.
(Print Team)
- I am enrolled in the Honors Program and wish to be assigned with another Honors student in Honors housing.
- I am a _____ major and wish to be assigned with another student with my major.
(Print Major)
- I prefer to live with _____ whose hometown is _____.
(Name of preferred roommate)
- I do not have any roommate requests.
- Please check here if you are a student with a disability who requires special housing accommodations (such as first floor access, use of an elevator, etc.) A Residence Life representative will contact you to discuss your housing needs.

Student's Signature _____ **Date** _____