

JACKSONVILLE COLLEGE
RESIDENCE HALL APPLICATION

Semester: _____ Year: _____

Name: _____
 Last First Middle Maiden

Social Security Number: _____

Home Address: _____
 Street City State Zip Code

Home Phone Number: _____

Birth Date: _____ Age: _____ Sex: (circle one) Male Female

Marital Status: _____ Single _____ Married _____ Widowed _____ Divorced

Classification: _____ Freshman _____ Sophomore Year Entering: 20 _____

_____ Fall Semester _____ Spring Semester _____ Summer I _____ Summer II

Ethnic Data: _____ Non Resident Alien: _____ Country: _____

American Citizen:

_____ White, Non-Hispanic _____ Black, Non-Hispanic
_____ Hispanic _____ Asian or Pacific Islander
_____ American Indian/Alaskan Native

Name of Parent or Guardian: _____

Address of Parent or Guardian: _____
 Street City State Zip Code

Name and address of person to be notified in an emergency:

Residence Hall Preference:

_____ Collins Hall (Women's residence hall – capacity 50)

Male applicants _____ Memorial Hall (Men's residence hall – capacity 50)

Please rank your
1st and 2nd choice _____ Pine Street (Men's residence hall – capacity 20)

(over)

Are you a church member? Yes No If yes, please give name and address of church: _____

Please list activities/hobbies/interests: _____

What type of person do you prefer for a roommate? _____

Are you a smoker non-smoker?

Is there a particular individual you would like for a roommate?

(Both students wishing to room together MUST request each other.)

Would you enjoy the experience of having a roommate from a different country other than your own? Yes No

Room assignments are made in the order they are received, as space is available. If application is received after all spaces are filled, we reserve the right to return the deposit to the applicant. An \$80.00 deposit must accompany this application. The deposit is refundable if written notice of cancellation is received by August 1st for Fall Semester, January 1st for Spring semester, or May 1st for Summer semesters.

I understand that submission of this application does not guarantee a room assignment or admission to the college. Confirmation of housing will be sent in writing.

Student Signature: _____ Date: _____

I have: Completed all blanks.
 Included my \$75.00 room deposit and \$5.00 key deposit

RETURN TO: OFFICE OF ADMISSIONS
Jacksonville College
105 B.J. Albritton Drive
Jacksonville, Texas 75766

PHONE NUMBERS: 903-586-2518
1-800-256-8522

EMAIL: admissions@jacksonville-college.edu
FAX: 903-586-0743