

GRADUATE HOUSING APPLICATION

University of the Cumberlands
Williamsburg, Kentucky 40769-1372
Tel. 606-539-4230
www.ucumberlands.edu

Please complete both sides and return to Student Services, 7910 College Station Drive, Williamsburg, KY 40769, or FAX (606) 539-4136

STUDENT STATUS Graduate Program Department _____

GA Department _____

Date of Enrollment Spring 20 _____ Fall 20 _____ Summer 20 _____

LAST NAME FIRST MIDDLE PREFERRED NAME

HOME ADDRESS

CITY COUNTY STATE ZIP

HOME PHONE CELL PHONE SEX DATE OF BIRTH

MARITAL STATUS SINGLE _____ MARRIED _____ DIVORCED _____ SEPARATED _____

EMERGENCY CONTACTS (Please list two contacts; if married, spouse and one other contact)

LAST NAME FIRST MIDDLE INITIAL

ADDRESS CITY STATE

PHONE CELL PHONE RELATIONSHIP

LAST NAME FIRST MIDDLE INITIAL

ADDRESS CITY STATE

PHONE CELL PHONE RELATIONSHIP

IF AT ALL POSSIBLE, WE WILL PROVIDE YOU WITH A SINGLE OCCUPANCY ROOM; HOWEVER, IF SPACE IS NOT AVAILABLE, PLEASE PROVIDE THE FOLLOWING INFORMATION REGARDING ROOMMATE PREFERENCES.

Do you have a specific roommate request? Please list the name (s).

Do you smoke? (Circle one) YES NO

What type of music do you prefer? _____

What is your religious preference? _____

How important is a quiet room to you? i.e. Would you prefer no visitors, occasional visitors or frequent visitors? Do you need quiet when you study, or do you study with music or TV?

Do you have health issues to be considered in making your room assignment?

I understand that the rules and regulations, as stated in the University of the Cumberland's Student Handbook (available on line at www.ucumberlands.edu), are applicable to undergraduate and graduate students.

Date

Signature