

UNIVERSITY OF WISCONSIN-SUPERIOR RESIDENCE HALL AND MEAL PLAN CONTRACT 2011-2012

Return this contract, along with the \$150.00 prepayment to:

Residence Life Office, UW-Superior, Box 2000, Superior, WI 54880.

PRINT NAME (Last) (First) Middle () Home Telephone number

() Cell Phone Number E-mail address

Permanent Address (Street) (City) (State) (Zip)

Student ID Number (UWS ONLY) Birth date Age Male Female

Cancellations on or before June 1 will be refunded \$50.00 of original prepayment. Penalty for terminating contract after July 1 is \$200.00 and August 1 is \$500.00.

I am contracting for: Academic Year (Sept-May) Spring Semester (Jan-May) Fall Semester Only (only non-required students) At beginning of term, I will be: New to the halls Returning to the halls Transferring to UWS

UWS STUDENTS ONLY: New Freshman Second Year Freshman Sophomore Junior Senior Graduate NON-UWS ONLY: Access Program Student WITC Student LSC Student Other:

I received information regarding Meningitis and the Hepatitis B viruses and vaccines available to prevent these two diseases? Yes No

MISSING PERSON CONTACT In the event that you are suspected missing, please list a contact that you wish us to contact (whether it be a friend, roommate, parent, etc) that knows where you are/have been.

Name (Print) Relationship Phone/Cell Number

EMERGENCY CONTACT (Medical or other) Name (Print) Relationship Phone/Cell Number

LIVING PREFERENCE Rank all choices, with "1" being your highest priority. Preference does not guarantee hall choice. Assignments are based on receipt order and whether space is still available in your preferred halls.

Please rank floor preference 1-3 Co-ed Single gender Substance Free Floor Please check preference Single room Double Room Disability Accessible Room Please Rank building preference 1-4: Curran-McNeill Ostrander Ross Crownhart (Transfer/Returning students only)

List any chronic or physical disabilities which necessitate special consideration:

ROOMMATE Roommates will select each other using Roommate Click. Each student must request one another for the roommate pair to be honored. Once a contract has been received by the Residence Life Office, the student will be emailed a username and directions on how to use Roommate Click.

*If you already know who you wish to be roommates with at the time your contract is submitted and have confirmed this with other student, please write that person's name below. Roommates will be paired once BOTH contracts have been received.

Roommate Name:

MEAL PLAN

Superior Plan (Unlimited Access) Black and Gold Plan (135 Meals) \$475 Jacket Cash NON-UWS STUDENTS ONLY

RESIDENCE HALL AGREEMENT: I have received, read and agree to the Residence Hall Contract Terms and Conditions and Student Rights and Responsibilities Handbook. I further agree to payment of the contract rates as they have been announced or as they may be adjusted. I understand that when this Contract is signed and returned it becomes a binding contract between UW-Superior and myself.

Student's Signature Date Parent or Guardian's Signature for those students under 18

FOR OFFICE USE ONLY

Date Deposit Received Receipt # Notes:

Crownhart Double Curran-McNeill Single Ostrander Other: Ross Room Number Mailbox