

Residence Hall Application and Contract

Please complete and return (inclusive of \$50.00 Residence hall fee) to:

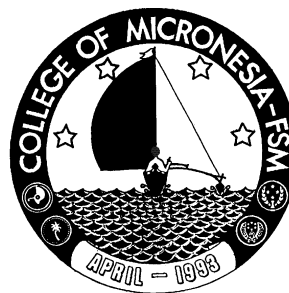
College of Micronesia-FSM

Student Life Residence hall

P.O. Box 159, Palikir, Pohnpei, FSM 96941

Phone: (691) 320-2445 ext. 163 , 320-4688 ext. 162

Fax: (691) 320-2479



General Information			
Last Name:		First Name and Middle Initial:	
Degree or Program:		Major:	
Gender:	Date of Birth:	Current Age:	SS No.:
Contract Dates: <input type="checkbox"/> Fall Semester _____ <input type="checkbox"/> Spring Semester _____ <input type="checkbox"/> Summer Session _____		Home Address:	
Phone Number:		E-Mail Address:	
Emergency Contact Information			
Name:		Address:	
Relationship:		Phone:	
Others			
Do you have any special health related difficulties, conditions, or allergies? <input type="checkbox"/> Yes <input type="checkbox"/> No		Please explain:	
Classification on entry will be: (Freshmen)____ (Sophomore)____ (Third-Year)____			
<p>I have read, understand and agree to be bound by the terms of the Residence Halls Contract, and the policies detailed in the COM-FSM General Catalog, the Residence Manual, and the Student Handbook.</p> <p>I understand that any violation of the COM-FSM Policy regarding alcohol, drugs, violence, or any other unacceptable behavior as detailed in COM-FSM publications will result in the termination of this contract but will not release me from the financial obligation.</p> <p>Signature of Student: _____ Date: _____</p>			

ACCREDITED BY THE WESTERN ASSOCIATION OF SCHOOLS AND COLLEGES (WASC)

This information is released to you and on the condition that you will not permit any other party to have access to such information without the written permission of the student. (Family Educational Rights and Privacy Act, 1974, as amended, Micronesia Board and Education Policy, 1977).