Northwest Indian College

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Office of Residence Life
2522 Kwina Rd, Bellingham, WA 98226
(360) 676-2772 Toll free: 1-866-676-2772 ext. 4207 Fax: (360) 752-1627

STUDENT RESIDENCE LIFE PROGRAM APPLICATION CHECKLIST

Please Include All of the Following Documents as Your Residence Life Program Application Packet

☐ **Completed Northwest Indian College Residence Life Program Application, Meal Plan sign up, AND Release of Information (included).**

☐ **Verification of Tribal Affiliation** (copy of enrollment card, CDIB, or letter from Tribe/Village verifying enrollment or status with tribe).

☐ **Copy of Social Security Card**

☐ **Copy of Financial Aid Award Letter**

OR

☐ **Proof of Ability to Pay** (If not eligible for Financial Aid)

☐ **Unofficial NWIC Transcript or Proof of Enrollment** (If you are not yet a NWIC student, a copy of your enrollment will be required tin the first week of classes

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You must also apply for admission to Northwest Indian College if you have not already done so. Admissions Application packets are available online or in the Office of Admissions: admissions@nwic.edu

For information on Financial Aid Eligibility or applications, contact the Financial Aid Office at 1-866-676-2772 ext 4206. Complete the FAFSA online at **http://www.fafsa.ed.gov**

For more information on Student Housing, contact the Office of Residence Life at 1-866-676-2772, ext 4207

Residence Life Application Deadlines

Fall Quarter 2008 - September 5, 2008
Winter Quarter 2009 - December 5, 2008
Spring 2009 - March 5, 2009

Applications May be Accepted After These Deadlines

Please send completed application packets to:
NWIC Office of Residence Life
2522 Kwina Rd, Bellingham, WA 98226

Questions?
Call 360-392-4207
Or toll-free 1-866-676-2772 ext. 4207

Northwest Indian College is a Drug and Alcohol-Free Environment

Updated 11/08

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RESIDENCE LIFE PROGRAM APPLICATION

1. Student Information

Full Legal Name _____
Last First Middle Jr., etc.

Former Name(s): If your first or last name has changed, please indicate your former full name(s)

_____ | _____
Last First Middle Jr., etc. Last First Middle Jr., etc.

Email Address _____

Current Mailing Address _____
Number and Street Apartment Number

_____
City State Zip

Primary Telephone ( ) _____ **Cell Phone** ( ) _____

Date of Birth ____/____/____ **Social Security Number** _____

Gender ☐ Male ☐ Female **Age** _____

Are you an enrolled member of the Lummi Nation? ☐ No ☐ Yes Enrollment # _____

If "No", are you an enrolled member of another federally recognized tribe? ☐ No ☐ Yes

If "Yes", Tribe _____ **Enrollment Number** _____

(Please note that to be considered a Resident for tuition paying purposes, we must have a copy of your Tribal verification on file)

How many credits are you/will you be enrolled in at NWIC? ☐ 12+ credits ☐ 7-11 credits ☐ 6 or fewer credits

Are you in good academic standing with NWIC and making an effort toward graduation? ☐ No ☐ Yes

Do you have any special dietary needs (vegetarian, allergies, religious restrictions, etc)? _____

_____

Do you have any health concerns we should be aware of? _____

_____

Have you ever been convicted of/pled guilty or no contest to a crime other than a minor traffic violation?

☐ No ☐ Yes (If your answer is "Yes", you must submit a full statement of relevant facts on a separate sheet attached to this application. You may be required to supply copies of official documentation with the outcomes of the proceedings)

RESIDENCE LIFE PROGRAM APPLICATION

2. Rental Agreement Type

☐ **Annual*** (Sept-June) **OR** ☐ **Quarterly**– Please Specify: ☐ Fall 2008 ☐ Winter 2009 ☐ Spring 2009

Occupancy Preference: ☐ Double (Two beds per room) ☐ Triple (Three beds in a loft room)

How will you be paying for rent? _____

Roommate Choice #1 _____ **Roommate Choice #2** _____

(The Residence Life staff will try their best to make these accommodations for you but we cannot guarantee roommate assignments)

* Rent is charged in quarterly increments

3. Roommate Questionnaire

Please check one answer for each of the following questions:

1. Do you generally keep your room:	☐ Clean/Neat	☐ Comfortable	☐ Messy
2. Do you smoke?*	☐ Frequently	☐ Occasionally	☐ Never
3. Do you drink alcohol?*	☐ Frequently	☐ Occasionally	☐ Never
4. When do you go to sleep?	☐ Before 10pm	☐ After 10pm	☐ Flexible
5. When do you wake up?	☐ Before 8am	☐ After 8am	☐ Flexible
6. How do you like to listen to music?	☐ Loud	☐ Medium	☐ Soft
7. How old will you be when you move into student housing?	☐ 18-20	☐ 21-24	☐ 25 or older
8. What temperature do you prefer to keep your room?	☐ Warm to hot	☐ Warm	☐ Cool/Livable
9. Are you comfortable with visitors in your room:	☐ All the time	☐ A little bit	☐ Not at all
10. What type of atmosphere do you like to study in?	☐ Quiet/No noise	☐ General noise	☐ Not in my room
11. How do you feel about sharing some of your items with your roommate? (Rather than having duplicates)	☐ Not comfortable	☐ Certain items only	☐ What's mine is yours and vice versa

12. What kind of music do you listen to? _____

13. What approximate age would you prefer your roommate to be? _____

14. What other preferences or concerns do you have for your room? _____

_____

*** Smoking and alcohol are not allowed in the NWIC residence hall**

Northwest Indian College is a Drug and Alcohol-Free Environment

RESIDENCE LIFE PROGRAM APPLICATION

4. Children

*NWIC permits one school aged child to reside with parent at the residence hall. First grade and above only.

Do you have a child that will be living with you in the residence hall while you attend NWIC? ☐ No ☐ Yes

Name of child _____ **Age** _____ **Gender** _____

Child's School _____ **Grade** _____

Does your child have any health concerns we should be aware of? _____

_____

5. Sign and Return by Priority Deadline

Please Initial Each Box and Sign Below

☐ I understand that NWIC Residence Life staff will make every effort to accommodate my preferences but cannot guarantee that they will all be met. I might be placed with a roommate that was not my first or second choice.

☐ I understand that any changes to the information provided in this application must be submitted in writing within two weeks of change (email is acceptable).

☐ I understand that providing false information on this application may be grounds for denial or eviction from the residence hall.

☐ I understand that upon moving into student housing I will be required to take a drug test and complete a background check.

☐ I understand that I must abide by the Housing Policy including the Zero Tolerance policy and I may be evicted for violation of housing policies. I agree to submit to a breathalyzer test if I give cause for suspicion of violating this policy.

I certify that the information provided above is true and correct to the best of my knowledge

Student Signature _____ Date _____

Residence Life Application Deadlines

Fall Quarter 2008 - September 5, 2008
Winter Quarter 2009 - December 5, 2008
Spring 2009 - March 5, 2009

Please mail completed application packets to:
NWIC Office of Residence Life
2522 Kwina Rd, Bellingham, WA 98226

For Office Use Only:

Received:_____ **Deposit Paid:**_____

Award Letter:_____ **Approved/Denied:**_____

Drug Test Results:_____ **Director's Initials:**_____
P/F

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RESIDENCE LIFE
MEAL PLAN SIGN UP

Please select ONE of the options below, print and sign name. All meal plans are billed to your student account. Meal plans are automatically renewed the following quarter (during the 08-09 academic year) unless you change your plan. Students may purchase additional Punch Cards as needed from the accounting office.

☐ **Quarter Meal Pass - $680.** Student is issued a quarterly meal card. This includes Lunch and Dinner Monday - Friday from the first day of classes to the last day of classes.

☐ **80 Meal Punch Card - $520.** Student is issued four cards good for 20 meals each any time during regular meal hours. One punch is taken for each meal.

☐ **60 Meal Punch Card - $390.** Student is issued three cards good for 20 meals each any time during regular meal hours. One punch is taken for each meal.

☐ **40 Meal Punch Card - $260.** Student is issued two cards good for 20 meals each any time during regular meal hours. One punch is taken for each meal.

☐ **20 Meal Punch Card - $130.** Student is issued a card good for 20 meals any time during regular meal hours. One punch is taken for each meal.

Student Name: _____ **Student Number:** _____

Signature: _____ **Date:** _____

The Residence Life Dining Hall is open on all days during the academic quarter when the college is open. On days when the college is closed for weekends, holidays or breaks, there is no dining service.

Days of operation:	Monday - Friday
Hours of operation:	Lunch 11:00am - 1:30pm
	Dinner: 5:30pm - 7:30pm
Quarter start and end dates:	Fall: September 22 - December 12
	Winter: January 5 - March 25
	Spring: April 6 - June 18

For more information on Student Meal Plans, contact the Office of Residence Life at 1-866-676-2772, ext 4207

Office use only

Date received:_____ **Received by:** _____

Card issued: _____

Notes: _____

-Copy to student housing file
-Original to Accounting Department

Updated 11/08

Authorization for Release of Information

CONSENT:
I authorize and direct any federal, state, local agency, organization, business, or individual to release to the Lummi Housing Authority and NWIC Student Housing any information or material needed to complete or verify my application for residence in the Lummi housing program or NWIC student housing. I understand and agree that this authorization or the information obtained with its use may be given to and used by the Lummi housing division in administering and enforcing program rules and policies.

INFORMATION COVERED:
I understand that, depending on program policies and requirements, previous or current information regarding my household or me may be needed. Verifications and inquiries that may be requested included but not limited to:

Medical, or child care allowances, public benefits, credit, employment, income or assets, residence and rental activity, criminal history, identity and marital status.

I UNDERSTAND: that this authorization cannot be used to obtain any information about me that is not pertinent to my eligibility for continued participation in a Lummi Housing program.

GROUPS OR INDIVIDUALS THAT MAY BE ASKED
The groups or individuals that may be asked to release information include, but are not limited to:

Medical & treatment providers	Previous & Potential Landlords	LIBC entities
Public Assistance Programs	Law enforcement agencies	Courts
Past & Present employers	Unemployment agencies	Child support agencies
Social Security Administration	Educational Institutions	Veterans Administration
Financial Institutions	Credit Bureaus	Utility Companies

CONDITIONS
I agree that a photocopy of this authorization may be used for the purpose stated above. I understand that this release of information may be used for all documentation necessary for participation in programs administered through Lummi Housing and NWIC. I understand that I have the right to review my file and correct any information that I can show incorrect.

_____	_____	_____
Full Legal Name	Date of Birth	Social Security Number

_____	_____
Signature	Date

Northwest Indian College Residence Life Office * 2522 Kwina Road, Bellingham, WA 98226