



# DEPARTMENT OF RESIDENTIAL LIFE

UNIVERSITY AT ALBANY State University of New York

## SPRING SEMESTER 2010 HOUSING REQUEST APPLICATION

Application can be submitted after a housing deposit in the amount of \$125 (MC, Visa, Discover, or check made out to University at Albany) has been made to the Bursar's Office (CC 26). Deposits are only refundable if the cancellation is received prior to Check-In. Upon completion of all fields in this application, please fax to the Department of Residential Life, Attn: Assignments at 518-442-5835. NOTE: ALL HOUSING IS NON SMOKING.

### 1) PERSONAL INFORMATION:

LAST NAME															FIRST NAME										MI	BIRTH DATE			
ADDRESS															CITY										STATE		ZIP CODE		
COUNTRY										HOME TELEPHONE										CELL PHONE									
UAlbany ID										EMAIL ADDRESS																			

The University will use the student's UAlbany address for all official communication. Please make sure you check your UAlbany email account regularly. For help setting up this account, please contact the student helpdesk at (518) 442-3700.

2) GENDER:  MALE  FEMALE

3) CLASS YEAR:  FRESHMAN  SOPHOMORE  JUNIOR  SENIOR

## ROOM RATES

### Traditional housing

Included below are choices of room styles. Please note that given the time of year, spaces available are limited and therefore all "types" may not be available. Rooms are assigned on a first come first serve basis. Please indicate your preference in the space provided with the number: "1" as your first choice (2, 3 etc.). Please note the cost differential with room selected.

ROOM TYPE	DESCRIPTION	ACADEMIC YEAR	MY PREFERENCE
Standard Double Room	Traditional 2-person bedroom	\$6,324	_____
Designed Triple	Larger 3-person bedroom	\$6,324	_____
Enhanced Single(Alumni)	Larger 1-person bedroom	\$8,854	_____
PSI Single(Very Limited)	Designed for 1 person	\$7,589	_____

### Apartment housing

Apartment housing is only available for Juniors, Seniors, and students 21 years and older.

ROOM TYPE	DESCRIPTION	ACADEMIC YEAR	FULL YEAR	MY CHOICE
Empire Commons 4 / 4	4 Bedroom 4 Bath	\$9,606	\$10,726	_____
Empire Commons 4 / 2	4 Bedroom 2 Bath	\$9,269	\$10,354	_____
Freedom Standard Double	2-person bedroom	\$7,007	N/A	_____
Freedom Designed Single	Designed for 1 person	\$8,855	N/A	_____
Freedom Efficiency	1 person	\$7,911	N/A	_____

**Requested Roomate**

Must be same gender as applicant. We will attempt to grant your request if your intended roommate has applied at the time your application is received, and space permits. However, submitting a request does not guarantee that it will be honored.

**Roomate:**

Net Id: \_\_\_\_\_ UAlbany ID \_\_\_\_\_ Name: \_\_\_\_\_

**MEAL PLANS**

**Traditional Housing**

Students in traditional housing **are required** to participate in one of the residential meal plans (for a list please visit <http://www.mycampusdining.com/albany/>)

Students will be assigned to the Weekly Block unless they change their meal plan. Plan changes are allowed through the first 10 days of each semester.

Students may select their meal plan:

- At MyUalbany (click the meal plan change link below) – (to use this option, students must be registered for classes for that term).
- In person at the SUNYCard office (Campus Center, B52, near Financial Aid).
- By emailing the SUNYCard office.
- By faxing a letter with their plan request, Albany ID and name to (518) 442-8029.

**Apartment Housing**

Meal plans are optional for students living on Empire or Freedom. There are specially designed plans for students in the apartments. To sign up for one of these, please download the Meal Plan Contract and return it to the SUNYCard office by fax or in person.

Contact SUNYCard at (518) 442-5989 or (518) 442-5926 or email at [SUNYCard@ualbany.edu](mailto:SUNYCard@ualbany.edu)

I have read and understand the Terms and Conditions of the Residence Hall License for Room & Board 2009-2010 as stated. I understand that this license is binding. Students living in residence are expected to conduct themselves in a manner appropriate to an academic community living environment. Students must abide by the policies and regulations of the Terms and Conditions of the respective Residence Hall / Apartment License as well as by the University at Albany’s Community Rights and Responsibilities.

I certify that all the contained information is true and correct to the best of my knowledge. I understand that when I submit this signed application, it is binding for the period stated above, and I am entering into a legal and binding agreement to occupy the assigned room under the Terms and Conditions of the Residence License at the rates listed. **If I do not check-in, and DO NOT notify the Department of Residence Life until after the check-in date, I will incur weekly housing charges.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Parent:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(If student is under the age of 18)

**FOR OFFICE USE ONLY**

**Date of Receipt:** \_\_\_\_\_

**Staff (print):** \_\_\_\_\_

**Date Assigned:** \_\_\_\_\_

**Staff (print):** \_\_\_\_\_