GLENVILLE STATE COLLEGE

Office of Housing and Residence Life
Current Student Housing Application

Name: _____
Last First Middle

Student ID #: _____

Gender: ❒ Female ❒ Male

Address: _____
Street Address City

_____
State Zip Home Phone

Term applying for:
1. Fall 20 _____ (year)
2. Spring 20_____ (year)

Current Facility/Room: _____ E-mail Address: _____

Would you like to request to stay in same facility/room? (This is not guaranteed): _____

Below is an opportunity for you to provide information about yourself, which may assist our office in assigning you a roommate/suitemate with similar interests:

- I am a: ❒ Non-smoker ❒ Smoker ❒ Morning person ❒ Night person ❒ Neat and Tidy ❒ Messy
- My major is: _____
- My interests include: _____
- Residential Facility Request:
  Goodwin Hall: Double Room: ____ Single Room: ____ Pioneer Village: ____ Married Housing (Pickens): ____

Preferred Roommate (share a room) – Goodwin Hall
Name _____
Last First Middle Initial

Preferred Suitemate (share a bathroom) – Goodwin Hall
Name _____
Last First Middle Initial
Name _____
Last First Middle Initial

Additional Housemates Preference – Pioneer Village
Name _____
Last First Middle Initial
Name _____
Last First Middle Initial
Name _____
Last First Middle Initial

PLEASE NOTE

- All students residing on campus are required to have a College meal plan. All requests for meal plan changes must be made, by the student within the first two weeks of each semester to the Dining Services Office.
- Changes to this housing application, including cancellations, requested roommates or facility preference can only be made by the applicant and not a parent, guardian, or friend.
- We will try to honor all room requests but please note that they are not guaranteed.
- In order for a student to be assigned a room he/she must complete and submit a Housing Application along with payment.
- Please return the above material with your check made payable to Glenville State College to the Office of Housing and Residence Life or send to:
  Office of Housing and Residence Life, Glenville State College, 200 High Street, Glenville, WV 26351 Phone (304) 462-4111

Student Signature: _____ Date: _____

OFFICE USE ONLY

Date Received: _____ Time Received: _____ Received by (initials): _____

Payment Method: Check # _____ Cash _____ Receipt # _____ Money Order # _____

Final Room Placement: _____