



# CENTURY COMMONS

2311 Andrews Highway  
Odessa, Texas 79761  
Office: (432) 335-6300  
Fax: (432) 335-6792  
E-mail: centurycommons@odessa.edu

### Office use only:

Date Application Received \_\_\_\_\_  
Deposit or Application Fee Received \_\_\_Yes \_\_\_No  
Form of Payment: Money Order Check Cash  
Check # \_\_\_\_\_

## RESIDENTIAL HOUSING APPLICATION Page 1

Semester you plan to live in the dorm:  Fall  Spring  Summer I  Summer II

Are you on an athletic Scholarship?  Yes  No

Men's Basketball  Men's Rodeo  Baseball  Men's Cross Country  Dance  Athletic Training

Women's Basketball  Women's Rodeo  Softball  Women's Cross Country  Cheerleading  Golf

## PERSONAL INFORMATION

(Please type or print clearly)

Full legal Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Other \_\_\_\_\_

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_

Permanent address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone : Home (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

Date of Birth Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_ Gender (mark one) Male: \_\_\_\_\_ Female: \_\_\_\_\_

### EMERGENCY INFORMATION: In case of an emergency, medical or otherwise

Parent/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_

Second Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

## IMMUNIZATION REQUIREMENT

### IMPORTANT INFORMATION ABOUT BACTERIAL MENINGITIS:

All colleges and universities in the State of Texas, as of Jan 1, 2010, require all new and transfer students living in on-campus housing to provide proof of receiving the bacterial meningitis vaccine. The vaccine must be administered a minimum of 10 days prior to moving into campus housing. Students will not be allowed to move in to any campus-owned housing until proof of the vaccination has been received.

Students who cannot provide proof of vaccination or a physician-signed medical exemption will be required to seek lodging off-campus at their own expense. A campus housing key may be issued once vaccination has been administered and the 10 day period has fully elapsed.

## UNIT PREFERENCE

One private bedroom in a two bedroom apartment with 15 meals per week  
**\$2350 (per semester)**

One private bedroom in a four bedroom apartment with 15 meals per week  
**\$2050 (per semester)**

Rates are subject to change pending final budgetary approval. Please contact Housing Staff regarding summer rates.

Each bedroom space is furnished with a twin bed, chest of 4 drawers, computer desk, and night stand. Student is expected to furnish their own towels, linens, pillows, blankets, kitchen cookware, utensils, dishes, and personal items needed.

Priority is given to returning students. Following returning student placement, new students, based on availability and the date a completed application and deposit were received, will be assigned to rooms.

**NOTE: Student will be responsible for all cancellation/termination fees for breach of housing contract or early termination.**

Please assign: \_\_\_\_\_ as my roommate, if possible.

I consider myself a:  Night Owl (lights on after 11p.m.)  Early riser (lights on by 7 a.m.)

What is your major: \_\_\_\_\_ Hobbies/Special Interest: \_\_\_\_\_

When Do you study?  Morning  Afternoons  Late nights

When you meet new people are you:  Shy  Outgoing

Do you keep your room:  Neat (always picked up)  Fair (things typically picked up)  Cluttered (clean up before room check)

Do you smoke? \_\_\_\_\_ Smoking and use of all tobacco products are prohibited inside the Residence Hall.

Anything else you would like to share, that would help us assign you a roommate?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do have any of the following conditions:  Food allergies  Asthma  Diabetes

Accommodations are available upon request to individuals with disabilities (must be documented).

By signing below, I give Odessa College permission to share my name and phone number with my potential roommate.  
(Please note that roommate changes may occur after information has been sent.)

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

**RELEASE OF LIABILITY**

I release Odessa College, its employees and representatives for incidents which may cause me physical, mental or monetary loss or damage, except in those incidents where the college can be shown negligent and directly responsible for the loss or damage. Odessa College does not maintain insurance on any personal property of occupants.

Date: \_\_\_\_\_ Applicant's Signature \_\_\_\_\_

Mail this completed and signed Residence Hall Application to:

Century Commons  
Odessa College  
2311 Andrews Hwy.  
Odessa, TX 79761  
Or Fax to (432) 335-6792

**NOTE: A \$422 security deposit and \$50 application fee must be paid (by mail or in person) to the Cashier's Office located in the OC Administration Building before a room will be reserved. This deposit cannot be added to an NBS installment plan. Prior to move-in, final payment arrangements must be made. In case of cancellation, a deposit refund request must be submitted in writing by JULY 1, for the fall semester and DECEMBER 1, for the spring semester.**

\*A guarantor's information and signature will be required on the lease contract if applicant is less than 18 - years - old.