

## Francis Marion University ON-CAMPUS HOUSING APPLICATION Office of Housing & Residence Life

For office use only	
Paid \$	
Date:	

5130 East Palmetto Street I Florence, SC 29506 Phone: 843-661-1330 I Fax: 843-661-1334

To apply for on-campus housing, complete this application and enclose fees as indicated below. Fall/Spring applications: \$173.00 (non-refundable) for the application and reservation fees. You must apply and be accepted for admission to FMU before your application can be finalized.

TO BE SEED OF	CLASS STATUS	and SEMESTER IN	IFORMATION	
Desired Entrance Year:				er s
	☐ Fall ☐ Spring	Late Spring	☐ Summer I	☐ Summer II
Classification:	☐ Freshman	Sophomore	Junior	☐ Senior
	Graduate Student	☐ Patriot	Pathway Program (re	quires eligibility)
	PERS	ONAL INFORMATION	ON	
Name:	FMU Student ID Number:			
Home Address:	Apt/Lot:			
City:	*	St	ate:	_ Zip:
Home phone:	Cell p	phone:	Country:	
Email:	Gend	er: 🖵 Female 📮 Male	Date of Birth:	
First time in college? $\Box$	Yes 🗖 No	Transfer S	Student: 🖵 Yes 🔲 N	10
Please list any medical c	onditions that require spec	ial housing conditions: _		
In case of emergency, wh	no do you want notified?			
Name	550	н	ome Phone:	
Address:		C	ell Phone:	
City, State & Zip:		R	elationship to Studen	nt:
	PARENT/LEGAL GL	JARDIAN CONTAC	INFORMATION	
Name:	3	Relationship:		
Address (if different from	above):			
City, State & Zip:		Home Phone:		
Email:		Cell Phone: _		
Acceptance of application a application is received. Ear	room assignment. Receipt and fees does not guarantee rly applications are encourag m/Application fee has been pa	e an assignment. Assignment. Housing and Residen	ent is contingent upon	admission and date housing
Signature:			Date:	



## Francis Marion University

## **Housing Assignment**

For office use of	nly
Date Received:	
Assignment:	

Preference Questionnaire This questionnaire is part of the Housing Application. Your answers will be utilized in the roommate and room assignment Please clearly print or type your responses. Name: \_\_\_\_\_ FMU ID Number: \_\_\_\_\_ Student's Cell Number: \_\_\_\_\_ Gender: Gender: Male LIST REQUESTED ROOMMATES/SUITEMATES PREFERENCE Roommate request must be mutual. The priority deadline for roommate requests is June 15, requests made after that time will be granted upon availability. Every effort will be made to accommodate requests, but requests cannot be quaranteed. 3. Name: \_\_\_\_\_ HOUSING PREFERENCE INFORMATION What is your intended major(s)? Do you smoke? Yes No Note: Francis Marion University is a smoke-free campus. Would you consider yourself more of a(n): Early bird (early to bed, early to rise) ☐ Night owl (stay up late, naps during the day) Moderate night owl (like to stay up late if I don't have to get up early) When it comes to cleanliness, with which statement would you most closely identify? As long as I can find my bed, I'm fine. I generally keep my room pretty clean. There is a place for everything and everything should be in its place. Which of the following best describes your study habits? ☐ I need a quiet place to study. ☐ I study late into the night. I can study with TV/music on. ☐ I would study at the library. How often are you comfortable with having guests? Often ☐ Sometimes Rarely or never What type of music do you listen to? Select all that apply. → Alternative ☐ Classical ☐ Country ☐ Hip-Hop/Rap Pop □ R&B Other: Rock Will you be playing a sport at FMU? A No A Yes What sport? Do you wish to be assigned to Honors Housing? (Requires eligibility check) \(\bigcup \) Yes \(\bigcup \) No Other considerations (hobbies, special interests, special requests, etc): Signature: \_\_\_\_\_ Date: \_\_\_\_\_