UNIVERSITY OF TECHNOLOGY, JAMAICA

For Office Use Only

Accept_____

Reject_____

Waiting List _____

Boarding Application

Telephone: 927-1680 Ext. 2191/2262, Fax: 977-2675

Complete carefully ALL sections applicable to you. Incomplete application forms will **NOT** be processed. **ALL RETURNING RESIDENT AND NON-RESIDENT STUDENTS ARE REQUIRED TO SUBMIT A COPY OF THEIR PROGRESS REPORT TO THE ACCOMMODATION OFFICE FOR FINAL ACCEPTANCE.**

SECTION A: To be completed by **ALL APPLICANTS**

Please tick (√) where applicable

ف New Student
ف Returning Non-Resident Student
ف Returning Resident Student
ف Community College Transfer Student
ف Inter Department/Faculty Transfer Student
ف Summer Student

Personal Details

Name

Title	Surname	First	Mdl. Inls.	UTech's ID No. (if applicable)

Date of Birth (DD-MM-YY)	Tel. No.(s)	Tel. No(s)
/ /	H ( ) _____	C ( ) _____
	W ( ) _____	O ( ) _____

Email Address (**PLEASE PRINT CLEARLY**)

Nationality: _____ Religion: _____ Denomination: _____

Contact Information

Mailing Address: _____

_____

Tel. No(s): Home: ( )_____ Cell: ( ) _____
Work: ( )_____ Other: ( ) _____

Next of Kin: _____ Relationship: _____
Address: _____

_____

Tel. No(s): Home: ( )_____ Cell: ( ) _____
Work: ( )_____ Other: ( ) _____

Course of Studies:

State the faculty, school and programme to which you applied at UTech:
Faculty: _____ School: _____

Programme: _____ Year: _____
Programme mode: Full-time □ Part-time □ Summer □

License Period: Please indicate the period for which you are requesting boarding

Semester 1 (only) August - December □ Semester 1 & 2 August - May □
Semester 2 (only) January - May □ Summer May - August □
(Please note that preference will be given to students requesting boarding for Semester 1 & 2)

Hall Preference:

Double occupancy:
Hall A □ Hall B □ Hall E □ Hall F □
(Female) (Female) (Female) (Male)

Triple occupancy:
Garvey Hall □ Farquharson Hall □
(Female) (Male)

Should my preference be unavailable, I will accept other room type: yes □ no □

To Completed by Owners of Motor Vehicles

Type: _____ Registration no. _____

Make: _____ Model: _____

Parking Space no.:

Father's Occupation: _____ Mother's Occupation: _____
Guardian's Occupation: _____
What is your birth position in the family? _____of _____ No. of dependents under parents'/guardians' care _____

Who will finance you for the upcoming academic year? Tick as many as are relevant to you.
ڤ Father ڤ Mother ڤ Self ڤ Other (specify) _____

Have your applied for Student Loan: ڤ Yes ڤ No

Have you requested: Grant □ Sponsorship □ both □

If yes, please state the organization(s) and the amount:
(1) _____/ $_____
(2) _____/ $_____

SECTION C: To be completed by all applicants **except Summer and Returning Resident Students**

Please list extra-curricular activities you have been involved in at high school, community college, university and in your community over the last two years

1. _____ 2. _____
3. _____ 4. _____
5. _____ 6. _____

Please list your special skills, experiences and abilities

1. _____
2. _____
3._____

In the space below, write a short paragraph outlining your reasons for needing boarding on campus apart from location and cost.

Section D: To be completed by **Returning Residents Students ONLY**

Hall/Block _____ Years on Dorm _____ Room Number _____

List Hall Committee(s) on which you have served:
1. _____ 2. _____

3. _____ 4. _____

Hall or University Events/activities participated in _____
_____
_____
_____

In the space below, write a short paragraph outlining why you should be readmitted to the Hall.

Section E: To be completed by **Summer Students ONLY.**

Please indicate the date you intend to start living on dorm _____

Please indicate your departure date _____

I hereby certify that the information given above is true.

Signature _____ Date _____
Applicant

Please note:

- **This form must be completed on line and or returned to the University's reception desk by January 31 .All Summer Students should contact the Accommodation Office by March 4 to confirm the status of their application.**