



Office of Faculty and Student Services,
Housing & Residence Life
2009/2010

**HOUSING APPLICATION FORM
FOR RETURNING RESIDENTS**

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|-----------------------------|
| Center/ University ID #: |
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| CONTACT DETAILS | |
|--|---|
| Name (last/family, first, middle): | |
| Permanent Address: | Mailing Address: <input type="checkbox"/> Same as permanent address |
| Family Contact Address: <input type="checkbox"/> same as permanent address | I would like to apply for: <input type="checkbox"/> Fall semester _____ (year) <input type="checkbox"/> Spring semester _____ (year) <input type="checkbox"/> Fall & Spring semesters <input type="checkbox"/> I am an exchange student |
| Are you a resident of Qatar? <input type="checkbox"/> Yes <input type="checkbox"/> No | Citizenship: |
| Date of Birth: __/__/____ (DD/MM/YYYY) | Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female |
| Marital Status: <input type="checkbox"/> Unmarried <input type="checkbox"/> Married | Telephone (family contact #): +() |
| Telephone (mobile): +() | Email address(es): |
| UNIVERSITY INFORMATION | |
| University/Center: | Major: |
| Current Academic Standing: | <input type="checkbox"/> Freshman - Completion of 0-29 credit hours <input type="checkbox"/> Junior - Completion of 60-89 credit hours <input type="checkbox"/> Sophomore - Completion of 30-59 credit hours <input type="checkbox"/> Senior - Completion of 90 + credit hours |
| IMMUNIZATION AND INSURANCE | |
| Some Branch Campuses require students to have up-to-date immunizations and proof of insurance. | If this is required by your Branch Campus: Are your immunization records turned in: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Is your proof of insurance turned in: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| CURFEW & GUARDIANS(TO BE COMPLETED BY MALE AND FEMALE STUDENTS) | |
| <p>Unless QF Housing and Residence Life has received a letter from your parents changing your curfew, the original curfew agreed upon by you, your parents and QF will remain in effect through graduation.</p> <p>Note: Students studying at a branch campus or center often have academic obligations, such as participating in study groups and doing research in a library, which may require them to work into the evening at locations within Education City. The curfew we can offer is between 11:00 p.m. and 6:00 a.m.</p> <p>Housing and Residence Life can only track entry to and exit from the residence halls. If your student violates his or her curfew time, that information will be sent to you in a monthly report via email.</p> | |
| <input type="checkbox"/> A new letter from my parents regarding my curfew is included with this application | <input type="checkbox"/> I understand the curfew agreed upon from my initial housing application remains in effect. |
| Guardian's name: | Date: |
| Guardian's signature: | Guardian's email address: |
| If a curfew is chosen, attach a copy of the guardian's passport or government ID which shows: picture, name, and signature. | |
| PAYMENT | |
| <input type="checkbox"/> Damage Deposit paid in initial application | Damage Deposit is QAR 2000: |
| <input type="checkbox"/> Damage Deposit included with application | QR Account Number: 0013-035555-001 |
| Payment Option to Qatar National Bank*: *Wire Transfer *Certified Check (Cash is NOT accepted) | USD Account Number: 0013-035555-061 |
| | SWIFT CODE: QNBAQAQA |
| | Account Name: Qatar Foundation |
| | *Make sure to list the following: The student's name, indication of what money is for: Housing Application, Damage Deposit. Payable to Qatar Foundation. |

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| <input type="checkbox"/> Housing Fee Balance (7000QR/semester): | | QAR 7000 is enclosed: | |
| Payment Option to Qatar National Bank*: *Wire Transfer *Certified Check (Cash is NOT accepted) *Payment in full must be received prior to receiving keys for the academic term. *You may combine the payments in one so long as both expenses are itemized on the transaction. | | QR Account Number: 0013-035555-001 USD Account Number: 0013-035555-061 SWIFT CODE: QNBAQQA Account Name: Qatar Foundation *Make sure to list the following: The student's name, indication of what money is for: Housing Application, Reservation Fee. Payable to Qatar Foundation. | |
| By signing below I acknowledge that I have read and agree to the complete terms and conditions of the Qatar Foundation Housing Agreement 2009-2010. | | | |
| Student Applicant's Name (printed): | | | |
| Student Signature: | | Date: | |
| Once your application is complete and you have attached all the required documents, please have your university or center fill out the section below. Upon completion you may send it to the department of Housing & Residence Life in SB2. | | Please only return one (1) application form otherwise you may be charged 2000QR for each additional application. | |
| BELOW THIS AREA: EDUCATION CITY BRANCH CAMPUS/CENTER USE ONLY | | | |
| University/Center: | | Academic Standing: | |
| Immunization Records received? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A – If required by the university/ center, please notify student this must be turned in for completion of housing application. | | |
| Proof of Insurance received? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A – If required by the university/ center, please notify student this must be turned in for completion of housing application. | | |
| This student is eligible to attend this branch campus for the academic year 2008-2009 <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please contact Belle Vukovich Kenoyer in Housing and Residence Life (454-0372) bkenoyer@qf.org.qa. | | | |
| Branch Campus Authorized Signature: | | | |
| Student's assigned email address: | | Student ID #(also put on pg. 1, top): | |
| QF HOUSING & RESIDENCE LIFE USE ONLY | | | |
| Application Received by (print name): | | | Date: ___/___/___ |
| Application is: <input type="checkbox"/> Complete <input type="checkbox"/> Incomplete | | | |
| <input type="checkbox"/> Incomplete. If incomplete, send back to student: | | Date returned to student: ___/___/___ | |