



# Norfolk State University

Norfolk, Virginia  
www.nsu.edu/residentiaallife/

## Application for On-Campus Residency

★ **Priority Deadline for Fall/Spring Semesters: MAY 31<sup>st</sup>** ★ **Priority Deadline for Spring Semester Only: NOVEMBER 1<sup>st</sup>** ★

In order to process your housing application, you must have paid your \$300.00 non-refundable deposit and if you are a returning student, be registered for the upcoming semester. To ensure proper processing, please submit your housing application and deposit at the same time. We accept payments by personal check, money order or certified bank check. You may mail your application and payment to us at the address listed on the bottom of the application. Payments by credit card must be made directly to the Cashier's Office at (757) 823-8545, Monday-Friday, 8:00am-5:00pm. **DO NOT SEND CASH IN THE MAIL.** For payments made through the Cashier's Office, please enter your receipt number below, and remember you must still send your housing application to the Office of Residence Life & Housing. **APPLICATIONS AND DEPOSITS WILL BE RETURNED TO NON-ADMITTED PROSPECTIVE STUDENTS. \*DNIMAS students are not required to complete a housing application.\***

**Classification:** Freshman \_\_\_\_\_ Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior \_\_\_\_\_ Grad. \_\_\_\_\_

**Entering Semester:** Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ YEAR \_\_\_\_\_

**Student Status:** First-time Student \_\_\_\_\_ Returning Student \_\_\_\_\_ Transfer Student \_\_\_\_\_

**Major:** \_\_\_\_\_ **Receipt Number:** \_\_\_\_\_

### Personal Data

Last Name (Print) \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Gender (male / female) \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

NSU Student ID# \_\_\_\_\_ Date of Birth (Month/Day/Year) \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_ Work Phone Number \_\_\_\_\_

### Family Data

Father or Guardian #1 \_\_\_\_\_ Mother or Guardian #2 \_\_\_\_\_

### Roommate Preference

*We can not guarantee your roommate choice. For priority consideration, please submit requests at the same time.*

Roommate's Name & Student ID # \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

**The Office of Residence Life & Housing has my permission to release my contact information to my prospective roommate(s):**  Yes  No

Do you smoke?  Yes  No Preferred Study Hours: \_\_\_\_\_ Music Preference: \_\_\_\_\_

I am most active during the:  day  night Hobbies or Interests: \_\_\_\_\_

People consider me to be a:  quiet person  average person  loud person

I prefer that the room be cleaned:  every day  once a week  once a month  once a semester

I plan to study in my room:  0-2 times per week  2-5 times a week  daily

I prefer a roommate who is a:  smoker\*  non-smoker  no preference

*\*Note: Smoking in any residence hall on campus is strictly prohibited.*

**PLEASE NOTE THE FOLLOWING:** EVERY EFFORT IS MADE TO HONOR ROOMMATE AND/OR RESIDENCE HALL REQUESTS. HOWEVER, YOUR REQUEST CANNOT BE GUARANTEED AS ALL ASSIGNMENTS ARE BASED ON SPACE AND AVAILABILITY.



For Office Use Only:  
 AD \_\_\_\_\_ Date \_\_\_\_\_  
 AH \_\_\_\_\_ Date \_\_\_\_\_  
 MS \_\_\_\_\_ Date \_\_\_\_\_  
 Deposit \_\_\_\_\_ Date \_\_\_\_\_

