

# **Bacone College Housing**

## **Applicant Checklist**

- Housing Application completed and signed
- Residence Hall Agreement signed
- Medical Release Form completed and signed

**Health and/or accident insurance verification, check which apply:**

- CDIB card (copy front and back)
- Health insurance card (copy front and back)
- Applying for accident insurance
- Immunization Records (verification of MMR & Hepatitis B shots or school record indicating same).

**If you will have a vehicle on campus, please supply the following information:**

- Photocopy of valid driver's license
- Complete Bacone Parking Permit Form
- Copy of current vehicle insurance coverage of the vehicle.

We look forward to you being a part of the Bacone College family. The Housing Office will be happy to assist you in any way. Office hours are Monday through Friday 8am to 5pm. For any questions please call (918)360-9703.

# Bacone College Housing Application

Name: \_\_\_\_\_ D.O.B. \_\_\_/\_\_\_/\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

*\*Your email and or cell phone number will be used to notify you in events of emergency.*

**Application for: (Check all that apply)**      **Academic Year:** \_\_\_\_\_

**Semester:**    Fall    Spring    Summer - Session 1  2  3

**Status:**    New Student    Returning Student    Athlete - Sport \_\_\_\_\_

**Classification:**    Freshman    Sophomore    Junior    Senior

**Gender:**    Male    Female

Academic Interest: \_\_\_\_\_ Hobbies: \_\_\_\_\_

I prefer to live with: \_\_\_\_\_

Please give my address & phone number to my potential roommate.

Do not give my address & phone number to my potential roommate.

The breakdown on the cost of student housing can be found in the "Bacone College Catalog" under Financial Information at [www.bacone.edu](http://www.bacone.edu). In signing this form, I am stating that I have filled out the above information accurately and truthfully. I understand that **Bacone College and its facilities are alcohol, drug and tobacco free**. I also understand that if I complete the exemption form and if it is denied, I will be enrolled automatically into student housing and assigned a room.

**Student Signature:** \_\_\_\_\_ **Date** \_\_\_/\_\_\_/\_\_\_

\*An exception to the housing policy may be granted if you meet the criteria. All applications for exemption must be presented to and approved by the Director of Housing and Hospitality. Proof of marriage, birth certificate of child, custody documents for a child, driver's license or utility bill will be requested to show just cause for an exemption to be approved. All exemption applications will be answered within 48 hours of receipt by the Housing Office.

## Bacone College Residence Hall Agreement

Bacone College Housing - 2299 Old Bacone Road, Muskogee, Oklahoma, 74403  
[housing@bacone.edu](mailto:housing@bacone.edu)

## **Fall 2020 - Spring 2021**

1. All freshman or sophomore students, all students who receive an athletic scholarship, all international students, and all students who receive an academic scholarship for 50% or more are required to live in the residence halls. Students must request a waiver from the Director of Housing if they want to live off campus.

2. If I request and receive a single room, I agree to pay the additional charge of \$500.00 per semester. If I request a room change, I will be charged an additional relocation fee of \$50.00 for each room change. Students who move themselves without notifying the Housing office will be subject to a minimum \$200.00-combined fine, plus the cost or replacement keys.

3. Bacone College has the right to reassign or adjust occupancy of rooms. Bacone College has the right to cancel or change any room assignment in the interest of other residents and maintain study conditions, rules and regulations, health, sanitation and safety. Rooms may be entered for inspection, cleaning, repair and maintenance. Rooms may also be entered in the event of an emergency.

4. Room and board is furnished under this contract. All students living in residence halls during the Fall and Spring Semesters *must* participate in the food service plan at levels offered. Dining service is available Monday - Friday during the days the college is in session.

5. I understand that room and board charges cover only those days the college is in session. Residence halls are closed during Thanksgiving, Christmas and Spring breaks and other posted days. I understand that during these specified college closings, there are no meals served and I must make arrangements for meals. The dates for campus closing are posted in the Master Calendar, which is located at [www.bacone.edu](http://www.bacone.edu). I understand that if I stay on campus during a break, I will be charged an additional fee for the days that I am in the residence hall or whatever other facility that the college places me in.

6. In the event that I move out of the residence halls, withdraw from college or removed from the residence hall, before the end of the semester, charges and refunds will be made in accordance with the Bacone College Refund Policy (refer to the College Catalog).

7. I agree that if I am required to vacate the residence hall because of disciplinary or academic actions, I must do so within 24 hours and I am responsible for the remainder of the contract. In extreme situations, immediate removal from the residence halls may be required.

8. I understand that I am allowed to have the following in my dorm room: a compact microwave, refrigerator, TV, VCR/DVD player, stereo, and coffee pot in my room. Please remember that volume of entertainment devices must be kept at a low level, conducive to study and rest. Sound equipment that disturbs the privacy of other residents may be

removed at the discretion of the Housing staff.

9. Items Not Allowed: Because the following items are considered to be fire hazards, they are not allowed in the residence halls: toaster ovens, hot plates, halogen lamps, deep fat fryers, George Foreman grills, waffle makers, sandwich makers, etc. Candles and incense are also not permitted. No heat producing devices are to be affixed to the wall or other combustible surface by order of the Fire Department. (This includes strands of lights). Power strips with surge protectors are encouraged and allowed. Three way plugs and extension cords are not allowed. If any of these items are found in a room, they will be confiscated and a fine will be issued.

10. Fire alarms are provided for your protection. Be sure and locate the Pull Station nearest your room and be familiar with the closest Fire Exit in the event you must use it. Federal and state laws prohibit the unwarranted pulling of fire alarms. Students who do so are subject to a significant fine from the College, possible suspension and further prosecution under local or state statutes.

11. All furnishings in your room are provided to assist you in your College life and studies. Please assist the College in maintaining it in the best possible condition. Damage to furniture, buildings or other property of the College will be charged to the responsible student at a cost determined by the College. If damage occurs within a residence hall, and no student accepts responsibility, all residents will be charged for the repair costs. All damages should be reported to the Housing Office as soon as possible.

12. Wall decorations are permitted and should be hung with care. Verify with your respective Housing manager on the approved methods that may be used for properly hanging your wall decorations. Occupants will be charged for cleaning, repairing and repainting if required.

13. Upon check-in, you are responsible for completing a room checklist with a member of the Housing staff. Rooms must be left clean upon checkout for vacation and at the end of the academic year. Damage and cleaning charges may be assessed, if necessary. Students must also turn in their dorm keys and ID card when they check out of their rooms. Upon checkout, you are responsible for completing a checkout form and a member of the Housing staff has made the final inspection of the room. Students must also turn in their dorm keys and ID card when they check out of their rooms. Failure to do so will result in a \$100.00 improper check out fine, and \$50.00 charge per room key. Fines can still be assessed two weeks following the close of school.

14. I agree to attend all required residence hall meetings. It is my responsibility to notify my Housing Manager or Residential Advisor if I am unable to attend the meeting. If I choose to miss

a meeting I may be assigned community service or a fine.

15. All rooms are furnished with single beds, dressers, desks, and chairs for each resident. The resident is responsible to bring sheets, blankets, towels, washcloths, pillowcases, and pillows. All furnishing provided by the college must remain in the room at the location where they are located during move-in. Residents of the Conference Center and New Dorms are also responsible to provide shower curtains for their pod.

16. Quiet hours are from 10:00 p.m. to 8:00 a.m. in all the halls. All entry doors are locked 24 hours a day.

17. Visitation is allowed in all residence halls; however, I am responsible for getting my visitors out of the residence halls on time. Multiple violations may result in the loss of visitation privileges. Students planning to be away should leave emergency information with their Housing manager.

18. In the event of a tornado, fire, or other emergency situation, I agree that I will immediately activate the evacuation plan for my assigned residence hall and to follow instruction of College personnel to maintain my safety as well as the safety of others.

19. I understand that any unpaid balance at the end of the semester will result in a "hold" on my academic record, denial of enrollment for the following semester and/or removal from the residence hall.

20. I understand that additional information is listed in the Student Handbook and Residence Life Handbook that is available at <http://www.bacone.edu/student-life.html>.

Resident Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Parent or Guardian Signature if Under 18 Years of Age: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

### Bacone College Medical Release Form

Student's Name: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

D.O.B.: \_\_\_/\_\_\_/\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Emergency Information**

In case of an emergency, contact:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Emergency Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Emergency Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Physician Information**

Physician Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Student Medical Information:**

Allergies: \_\_\_\_\_  
Current Medications and Dosages: \_\_\_\_\_  
Any Illness to Which Student is Prone: \_\_\_\_\_

**History of (Please Circle)**

Asthma	Dizziness	Heart Disease	High Blood Pressure
Epilepsy	Hypoglycemia	Fainting Spells	Low Blood Pressure
Mononucleosis	Diabetes	Headaches	Polio
Hepatitis A	Hepatitis B		

**Other (Explain)**

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

**Medical Insurance Information**

All students are required to provide proof of **medical/accident** insurance and provide **immunization records** before placement in a residence hall.

**A copy of the following documents must be submitted with this application to support the above requirement:**

Insurance card  Gold Seal Medical Expense Insurance (if no insurance card)

Immunization Record  CDIB, if Applicable

Policy Holder's Name: \_\_\_\_\_

Medical Insurance Contract Number: \_\_\_\_\_ Policy Number: \_\_\_\_\_

The above information is accurate to the best of my knowledge. I give permission to release information to insurance companies or medical personnel.

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_/\_\_\_/\_\_\_

Should I be unconscious, I give permission to an adult representative of Bacone College to act as a spokesperson in granting permission for emergency treatment including anesthesia, if necessary.

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_/\_\_\_/\_\_\_

Bacone College is a '**dry**' campus and has a very strong alcohol policy. The policies in your Student Handbook and Clery Act Disclosures are not meant to be punitive or negative. These policies are in place for your benefit and the safety of our campus community. Please read the following statements and sign.

I hereby give consent to a preliminary intoxicant screening to be performed by a law enforcement officer at the request of housing/college staff. I understand that this screening is for my health and safety, and that I will not be cited for violation of the student handbook, charged or arrested for getting screened.

I agree that if emergency medical services (EMS) is called when it is believed that I am under the influence of an intoxicant that I will not refuse medical assistance (which is known as an "RMA").

If I refuse to take the test or refuse to allow myself to be treated by EMS, I understand that I will be immediately suspended from housing because unscreened intoxication represents a hazard to myself and the campus community.

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_/\_\_\_/\_\_\_