

Choose the one that best applies to you:

This is my first year at ENMU. 🗌 I am a returning student, and have already lived on campus.

Student Appl	licant Informa	ition						
Legal name: La	st:		First:			Midd	lle:	
Preferred name:		Biol		Biolog	ogical Sex: 🗌 Male 🗌 Female			
Gender: Male	e 🗌 Female 🗌] Non-Binary						
Birthdate:			EN	MU ID n	number:			
Mailing address	5:		_ City: _			State:	ZIP:	
Phone:		Mobile phone:				ENMU email:		
Classification n	lext term: Free	shman 🗌 Sophon	nore	Junior	Senior	Graduate		
Contract term r	equested: 🗌 Fal	ll 20 Spring 20_		Fall 20_	only	Spring 20_	only	
Residence Hall Preference								
All residence h	alls are coed. Se	elect the correspon	ding roo	n type t	hat is on tl	he same line as	the hall.	
First choice:	Curry	Room type (choose	one):	Doubl	e 🗌 Priv	/ate		
(check one)	Guadalupe	Room type (choose	one):	Suite	Ser	niprivate suite		
	Eddy	Room type (choose	one):	Suite	Ser	niprivate suite	Double	Private
Second choice:	Curry	Room type (choose	one):	Doubl	e 🗌 Priv	vate		
(check one)	Guadalupe	Room type (choose	one):	Suite	Ser	niprivate suite		
	Eddy	Room type (choose	one):	Suite	Ser	niprivate suite	Double	Private
Third choice:	Curry	Room type (choose	one):	Doubl	e 🗌 Priv	vate		
(check one)	Guadalupe	Room type (choose	one):	Suite	Ser	niprivate suite		
	Eddy	Room type (choose	one):	Suite	Ser	niprivate suite	Double	Private
you indicate such a		suites and semiprivate is an additional charge are available.)			-			

Meal Plan Information

Please indicate your Meal Plan choice: Carte Blanche Option 19 Option 14 Option 10

Residence Hall and Dining Services Agreement: The Residence Hall and Dining Services Agreement is a legal and binding agreement between you and Eastern New Mexico University. Your signature indicates your commitment to pay for services for a academic year (fall and spring semesters) or the remainder of the academic year if you enter into the agreement after the start of the fall semester. Application for admission to the University and application for on-campus housing are separate processes, acted upon separately by the University.

Meal Plan Terms and Conditions: The meal plan requirement extends for the academic year. For specific meal plan requirements and additional information, contact the Office of Housing and Residence Life at 575.562.2631. Per University Residence Policy, students living in a residence hall are required to sign up for one of the four approved residence meal plans: Carte Blanche, Option 19, Option 14 or Option 10.

Meal Plan Refunds: Refunds will be processed based on tuition and fees refund schedule. After Aug. 31, no refunds will be allowed unless a student officially withdraws from the University. Upon official withdrawal and cancellation in writing to Housing and Residence Life, refunds will be given on a weekly basis.

Assignment Preferences

-		ssignment. We will try to honor you choose one item for each catego				
I am a:	Smoker (please specify	/): 🗌 Vape 🗌 Cigarettes 🗌	ther:			
	Nonsmoker					
I prefer to live with a:	Smoker	Nonsmoker	No preference			
I prefer going to sleep:	Before 11 p.m.	After 11 p.m.				
I prefer to keep my room:	Very neat	Tidy	Clean, but messy			
I consider myself:	Very social	Social	Reserved			
I prefer a roommate who is:	Very social	Social	Reserved			
I prefer to study:	In my room	Elsewhere in my dorm	In the library			
I prefer to study with:	Music/TV in backgrour	nd 🗌 No music/TV				
My special interests are:	interests are: I am a member of the ENMU Athletics community. If so, what team:					
	Baseball	Basketball	Cross country			
	Football	Rodeo	Soccer			
	Softball	Spirit squad	Track & field			
	Volleyball					
	I am a member of the ENMU fine arts community. If so, what discipline:					
	Art	Communication	🗌 Film			
	Music (band)	Music (choir)	Theatre			
	Other (please specify):					
I would like to room with an	international student.		Yes No			
I have physical disabilities o	r other conditions requiri	ng special housing consideratio	n. Yes No			
If yes, please indicate:						
Roommate Request Info	rmation					
If you are requesting a specific roommate, the Residence Hall Applications for both students should be submitted at the same time if possible, and the request must be mutual.						
Name of requested roommate	*					
Emergency Contact Infor	mation					
Name:		Relationship:				
Daytime phone:		Evening phone:				
Medical Information						

Do you have any medications or allergies (animals, food, etc.)?
Please list medications/allergies:

Additional comments:

Yes No

Housing Deposit Payment Options

Deposits are due at the time of application. You will not be assigned until the deposit is paid at the cashier's office.

You can pay with a credit or debit card by phone at 575.562.2632 or you can mail your check or money order to:

Housing and Residence Life ENMU Station 39 1500 S Ave K Portales, NM 88130

I agree that I have read and understand the Housing Deposit Statement

Acknowledgement and Signature

I understand my \$150 housing deposit will be refunded only if a written request for cancellation is received by: Aug. 1 for academic year (fall and spring semesters), Jan. 1 for spring only.

When I sign this application, I am agreeing to the terms and conditions of the Residence Hall and Dining Services Agreement, to pay all room and board fees when due, to abide by all the rules, regulations and policies as outlined in the Student Handbook, Guide to Campus Living, and supporting documents covering room and board accommodations at Eastern New Mexico University. This agreement terminates at the end of the spring semester. Moving or checking out of the residence hall does not constitute release from the agreement.

Applicant signature:	Date:				
Legal guardian signature required if housing applicant is 17 years old or younger.					
Legal guardian signature:	Date:				
Family Educational Rights and Privacy Act (FERPA) Acknowledgement and Signature					
I give permission for the following persons to have access to my housing information and records for (check all that apply):					
Housing and meal plan charges Disciplinary issues Other (please indicate):					
Name: First: Last:					
Relationship to student applicant:					

Name: First:

Last:

Relationship to student applicant:

I understand that this permission form is applicable only for the Office of Housing and Residence Life and that it expires at the end of the contract term noted above. I also understand that I must file a new permission form for each school year. If I decide I no longer want permission given to those listed above, it is solely my responsibility to notify the Office of Housing and Residence Life in writing. (Note: the offices of Counseling and Career Services, Financial Aid, Registrar, La Casa ENMU Student Health Services have their own specific information release forms.)

Applicant signature: _____

Date: