

NORTHWESTERN OKLAHOMA STATE UNIVERSITY

Housing Application

MAIL TO

NWOSU ATTN: HOUSING OFFICE

709 OKLAHOMA BLVD., ALVA, OKLAHOMA 73717-2799

Director of Students and Housing Phone: (580) 327-8418 / Fax: (580) 327-8413

E-mail (scanned copy): klhansen@nwosu.edu

OFFICIAL USE ONLY

DATE _____ DEPOSIT RECEIPT _____

DATE _____ ROOM ASSIGNED _____

CONTRACT PERIOD (Select one): [] FALL _____ [] SPRING _____

NAME _____ Social Security # _____ - _____ - _____
LAST FIRST MIDDLE INITIAL

DATE OF BIRTH _____ AGE _____ E-MAIL _____
***THE HOUSING OFFICE WILL SEND HOUSING ASSIGNMENTS TO THE ABOVE STATED E-MAIL ADDRESS**

ADDRESS _____ PHONE# _____
STREET CITY STATE ZIP CODE

PARENT / GUARDIAN _____
NAME PHONE RELATIONSHIP

ADDRESS _____
STREET CITY STATE ZIP CODE

EMERGENCY CONTACT _____
NAME PHONE RELATIONSHIP

Do you have an accommodation that should be considered before we assign you a room in university housing?

[] YES [] NO If so, please explain. _____

HOUSING DEPOSIT: When you apply for University Housing, a \$100.00 deposit is REQUIRED as a maintenance deposit and guarantee of contract completion. The deposit can be applied to any damage to room, furnishings, or failure to comply with the housing contract caused directly or indirectly by applicant, or anyone in the applicant's room. Applicant's may receive a refund of \$100.00 deposit when granted clearance from the residence hall supervisor upon completion of contract. **Cancellations of application must be received before August 1, 2018 for a full refund of the deposit. If the contract is cancelled after August 1st, the university will keep half of the deposit. Once a resident checks into his/her residence hall, he/she is bound to the academic semester term and cancellation would require a contract breakage fee of \$200.00 and forfeit their deposit. Students who fail to fulfill their contracts may be expected to pay for the full contract period and forfeit their deposit.**

Actual room reservations and assignments are made on the basis of dated receipt of application and the deposit. The housing office cannot guarantee your first choice but will make every effort to honor your preference. The university reserves the right to place all students.

Classification for this contract period: [] Freshman [] Sophomore [] Junior [] Senior [] Graduate Student [] Other

I prefer to be assigned to: [] Ament Hall (male) ROOMMATE PREFERENCE
[] Coronado Hall (male) [] Private
[] Fryer Hall (female) [] Semi-Private
[] South Hall (female)

Roommate / suitemate(s) preferred (optional): _____

Room number requested (optional): _____ What is your anticipated major? : _____

Will you be a member of a NWOSU athletic team? Yes [] No [] If yes, which sport _____

Any student residing in University Housing is required to have a meal plan. No refund is given for meals not eaten. Meal tickets are non-transferable from week to week. *Prices listed below are subject to change.

SEMI-PRIVATE ROOM	PRIVATE ROOM
[] 17 meals per week + \$50.00 flex per semester: \$2390.00	[] 17 meals per week + \$50.00 flex per semester: \$3075.00
[] 12 meals per week + \$100.00 flex per semester: \$2315.00	[] 12 meals per week + \$100.00 flex per semester: \$3000.00
[] 8 meals per week + \$150.00 flex per semester: \$2240.00	[] 8 meals per week + \$150.00 flex per semester: \$2925.00

If you are interested in a meals only contract, please contact the business office.

MEAL PLAN CHANGES CAN ONLY BE MADE THE FIRST TWO WEEKS OF EACH SEMESTER

Unused flex in fall semester rolls forward to spring semester so long as participant purchases a new meal plan in the spring. All unused flex at the end of spring semester reverts to Chartwells.

I understand and accept all terms and conditions listed on the front and back of this application form. I have read this contract and accept this plan for the full contract period and agree to pay the full amount for room and food service.

I realize I may be charged for a private room if I fail to find a roommate, do not wish to move to another room, am unable to get along with my assigned roommate, or fail to complete the agreement correctly. If you want to change your meal plan, please inform the Director of Students and Housing as soon as possible.

READ ALL PROVISIONS BEFORE SIGNING. See reverse side of contract for rules and regulations. You are legally bound by these contract items.

Signature of Applicant _____ Date _____

By typing your signature above, you are authorizing your electronic signature.

RULES, REGULATIONS, AND TERMS OF CONTRACT

1. **Deposit:** A deposit of \$100.00 must accompany this application. The \$100.00 is required as a maintenance deposit and guarantee of contract completion.
2. **Contract:** This contract for Northwestern Oklahoma State University (NWSU) housing and meals is for one academic semester and is binding, unless canceled on or before the last Friday before classes begin.
3. **Freshman Residency Requirement:** All first time freshman, attending the Alva campus, are required to live in university housing for two academic semesters (only fall and spring semesters apply). Freshman who want to request living off campus must complete the Freshman Residency Exemption Form for approval/denial. Freshman who fail to complete the freshman residency exemption process, or who are denied the exemption, will be charged for university housing for two academic semesters. Freshman who are removed from housing for any disciplinary reason may be charged for two academic semesters. The application for the Freshman Residency Exemption form may be found at www.nwsu.edu/living-on-campus.
4. **Conditions:** NWSU reserves the right to refund payments and to refuse assignment to any applicant, and to make all decisions as to room assignment. A student agrees as a condition of this contract to comply with all university and housing rules, regulations, and policies, incorporated herein by reference, which are now in effect or that are amended, or enacted during the term of this contract.
5. **Forfeiture / Cancellation:** Cancellations of application must be received before August 1, 2018 for a full refund of the deposit. If the contract is cancelled after August 1st, the university will keep half of the deposit.

Housing contracts are binding for the entire contract period. Once a resident checks into his/her residence hall, he/she is bound to the academic semester term and cancellation would require a contract breakage fee of \$200.00 and forfeit their deposit. Students who fail to fulfill their contracts may be expected to pay for the full contract period and forfeit their deposit.

6. **Late payments:** A \$25.00 late fee will be charged each time a room and board payment is late according to the official late penalty dates set by the business office. Residents who are habitually late or become more than one payment behind on room and board are subject to forfeiture of the deposit, removal from residence hall, \$200.00 contract breakage fee, and revocation of meal ticket.
7. **Occupancy:** Rooms must be vacated within 48 hours after the closing of the term. No deductions are made for weekend absences or holidays. Rooms can be occupied during official holidays. Students who may need to reside in one of the halls for a holiday or interim period must contact the Hall Supervisor. Any item left in a room at the end of a contract term will be held 15 days. After 15 days all items will only be considered abandoned and will be disposed of at NWSU's discretion.
8. **Care of Rooms:** Students must furnish their own linens, towels, and take care of their laundry and cleaning. Students are required to keep their rooms cleaned and in good condition. Room inspection will occur at each dorm's discretion. Rooms should be locked at all times when occupant is not in the room. Student's property in residence halls and other university buildings is at the whole risk of the owner, and NWSU is not responsible for loss or damage to such property from any cause. NWSU reserves the right to enter rooms for maintenance inspection, health and safety inspections, or other reasons deemed appropriate by housing employees.
9. **Private rooms:** Private room assignments are dependent upon space availability. The failure of NWSU to assign a private room will not be considered as a basis for termination of this contract. Private rooms are assigned according to the date contract and deposit is received.
10. **Housing Regulations:** At the beginning and throughout the semester you must be in good standing with NWSU. Any resident, who by their actions violate the NWSU Handbook and/or the Residence Hall Handbook may be fined, moved, or dismissed from the hall, and may, at the discretion of the Director of Students and / or Dean of Student Services, be recommended for further discipline from NWSU. If a resident is dismissed from the resident hall for disciplinary reasons, that resident is responsible for the full payment of their housing contract.
11. **Payment Schedule:** Payment for room and board may be made for the entire semester or students can sign up for the College Green Payment Plan through Ranger Net.

AFFIRMATIVE ACTION COMPLIANCE STATEMENT This institution, in compliance with Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, sections 503 and 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act Amendments Act of 2008, and other applicable federal laws and regulations, and to the extent required by law, does not discriminate on the basis of race, color, national origin, sex, age, religion, physical or mental disability, or status as a veteran in any of its policies, practices, or procedures. This includes, but is not limited to, admissions, employment, financial aid, and educational services. Inquiries concerning the application of these programs should be made to Calleb Mosburg, Dean of Student Affairs and Enrollment Management, Northwestern Oklahoma State University, 709 Oklahoma Boulevard, Alva, OK 73717, (580) 327-8415.



Northwestern
OKLAHOMA STATE UNIVERSITY

Department of Residence Life & Housing

Certificate of Meningococcal Waiver

Oklahoma Statutes, Title 70 §3243, requires that all students who are first time enrollees in any public or private postsecondary education institute in this state and who reside in on-campus student housing shall be vaccinated against meningococcal disease.

The statute permits the student or, if the student is a minor, the student's parent or other legal representative, to sign a written waiver stating that the student has chosen not to be or not to have the student vaccinated.

Circle one:

- 1) I have been vaccinated against meningococcal disease.
- 2) I have chosen not to be vaccinated* against meningococcal disease.

Please initial:

- 1) _____ I have received and reviewed detailed information on the risks associated with meningococcal disease

Student's Name: _____ Social Security # _____

Birth date: _____ Term/Year of enrollment: _____

Student Signature: _____ Classification: _____ Date: _____

When a student is under 18 years of age, the following must also be completed:

As the parent, guardian or other legal representative, I certify that the student named above is a minor and that I have received and reviewed the information provided and that I have chosen not to have the student vaccinated against meningococcal disease.

Parent Signature (if applicable) _____ Date _____

**With this waiver, I seek exemption from this requirement. I voluntarily agree to release, discharge, indemnify and hold harmless NWOSU, its officers, employees and agents from any and all costs, liabilities, expenses, claims, demands, or causes of action on account of any loss or personal injury that might result from my decision not to be immunized against meningitis.*

Emergency Medical Information

Personal Information:

Last Name: _____ First Name: _____ Middle Initial: _____ Student ID #: _____

Permanent Physical Address: _____ City: _____ State: _____

Campus Address: _____ Cell Number: _____ Date of Birth: _____

Emergency Contact Information: *In case of accident, illness, or other emergencies, please provide information for notification.*

Person to Notify _____ Relationship to you _____ Phone Number _____

Address _____ Other Phone Number _____

Insurance Information (Optional):

Insurance Carrier _____ Account Number _____

Policy Holder's Name _____ Relationship to You _____

Medical Information: *Please list medical needs/conditions for which housing staff or medical personnel need to be informed.*

Release of Information: *By signing below, in the event of accident, illness, or other emergency, the Residence Life & Housing Department may release the information on this form to emergency personnel.*

Student Signature _____ Date _____

Meningococcal Disease

Meningococcal disease can refer to any illness caused by the type of bacteria called *Neisseria meningitidis*, also known as meningococcus [muh-ning-goh-KOK-us]. These illnesses are often severe and can be deadly. They include infections of the lining of the brain and spinal cord (meningitis) and bloodstream infections (bacteremia or septicemia).

These bacteria spread through the exchange of respiratory and throat secretions like spit (e.g., by living in close quarters, kissing). Doctors treat meningococcal disease with antibiotics, but quick medical attention is extremely important. Keeping up to date with recommended vaccines is the best defense against meningococcal disease.

Risk Factors

Certain people are at increased risk for meningococcal disease. Some risk factors include:

- **Age**
 - Doctors more commonly diagnose meningococcal disease in infants, teens, and young adults. [Learn more about vaccine recommendations for age groups at increased risk \(https://www.cdc.gov/meningococcal/about/risk-age.html\)](https://www.cdc.gov/meningococcal/about/risk-age.html).
- **Community setting**
 - Infectious diseases tend to spread wherever large groups of people gather together. Several college campuses have reported outbreaks of serogroup B meningococcal disease during the last several years. [Learn more about vaccine recommendations for those at increased risk in community settings \(https://www.cdc.gov/meningococcal/about/risk-community.html\)](https://www.cdc.gov/meningococcal/about/risk-community.html).
- **Certain medical conditions**
 - Certain medical conditions and medications put people at increased risk of meningococcal disease. They include not having a spleen, having a complement component deficiency, and being infected with HIV. [Learn more about vaccine recommendations for those at increased risk due to certain medical conditions \(https://www.cdc.gov/meningococcal/about/risk-medical.html\)](https://www.cdc.gov/meningococcal/about/risk-medical.html).
- **Travel**
 - Travelers to the meningitis belt in sub-Saharan Africa may be at risk for meningococcal disease. [Learn more about vaccine recommendations for travelers \(https://www.cdc.gov/meningococcal/about/risk-travelers.html\)](https://www.cdc.gov/meningococcal/about/risk-travelers.html).

Causes

Bacteria called *Neisseria meningitidis* cause meningococcal disease. About 1 in 10 people have these bacteria in the back of their nose and throat with no signs or symptoms of disease; this is called being ‘a carrier’. But sometimes the bacteria invade the body and cause certain illnesses, which are known as meningococcal disease.

There are five serogroups (types) of *Neisseria meningitidis* — A, B, C, W, and Y — that cause most disease worldwide. Three of these serogroups (B, C, and Y) cause most of the illness seen in the United States.

Spread to Others

People spread meningococcal bacteria to other people by sharing respiratory and throat secretions (saliva or spit). Generally, it takes close (for example, coughing or kissing) or lengthy contact to spread these bacteria. Fortunately, they are not as contagious as germs that cause the common cold or the flu. People do not catch them through casual contact or by breathing air where someone with meningococcal disease has been.

Sometimes the bacteria spread to people who have had close or lengthy contact with a patient with meningococcal disease. Those at increased risk of getting sick include:

- People who live with the patient
- Anyone with direct contact with the patient’s oral secretions, such as a boyfriend or girlfriend

Close contacts of someone with meningococcal disease should receive antibiotics to help prevent them from getting the disease. This is known as prophylaxis (pro-fuh-lak-sis). Health departments investigate each case of meningococcal disease to identify all close contacts and make sure they receive prophylaxis. This does not mean that the contacts have the disease; it is to prevent it. People who are not a close contact of a patient with meningococcal disease do not need prophylaxis.

Signs and Symptoms

Seek medical attention immediately if you or your child develops symptoms of meningococcal disease. Symptoms of meningococcal disease can first appear as a flu-like illness and rapidly worsen. The two most common types of meningococcal infections are meningitis and septicemia. Both of these types of infections are very serious and can be deadly in a matter of hours.

Meningococcal Meningitis

Doctors call meningitis caused by the bacteria *Neisseria meningitidis* meningococcal meningitis. When someone has meningococcal meningitis, the bacteria infect the protective membranes covering their brain and spinal cord and cause swelling.

The most common symptoms include:

- Fever
- Headache
- Stiff neck

There are often additional symptoms, such as

- Nausea
- Vomiting
- Photophobia (eyes being more sensitive to light)
- Altered mental status (confusion)

Newborns and babies may not have or it may be difficult to notice the classic symptoms of fever, headache, and neck stiffness. Instead, babies may be slow or inactive, irritable, vomiting, or feeding poorly. In young children, doctors may also look at the child's reflexes for signs of meningitis.

Meningococcal Septicemia (aka Meningococemia)

Doctors call septicemia (a bloodstream infection) caused by *Neisseria meningitidis* meningococcal septicemia or meningococemia. When someone has meningococcal septicemia, the bacteria enter the bloodstream and multiply, damaging the walls of the blood vessels. This causes bleeding into the skin and organs.

Symptoms may include:

- Fever
- Fatigue
- Vomiting
- Cold hands and feet
- Cold chills
- Severe aches or pain in the muscles, joints, chest or abdomen (belly)
- Rapid breathing
- Diarrhea
- In the later stages, a dark purple rash

Diagnosis

Meningococcal disease can be difficult to diagnose because the signs and symptoms are often similar to those of other illnesses. If a doctor suspects meningococcal disease, they will collect samples of blood or cerebrospinal fluid (fluid near the spinal cord; see image below). Doctors then test the samples to see if there is an infection and, if so, what germ is causing it. If *Neisseria meningitidis* bacteria are in the samples, laboratorians can grow (culture) the bacteria. Growing the bacteria in the laboratory allows doctors to know the specific type of bacteria that is causing the infection. Knowing this helps doctors decide which antibiotic will work best. Other tests can sometimes detect and identify the bacteria if the cultures do not.

Prevention

Keeping up to date with recommended immunizations is the best defense against meningococcal disease. Maintaining healthy habits, like getting plenty of rest and not having close contact with people who are sick, also helps.

Vaccination

Vaccines help protect against all three serogroups (B, C, and Y) of *Neisseria meningitidis* bacteria commonly seen in the United States. Like with any vaccine, meningococcal vaccines are not 100% effective. This means there is still a chance you can develop meningococcal disease after vaccination. People should know the [symptoms \(https://www.cdc.gov/meningococcal/about/symptoms.html\)](https://www.cdc.gov/meningococcal/about/symptoms.html) of meningococcal disease since early recognition and quick medical attention are extremely important.

Antibiotics

Close contacts of a person with meningococcal disease should receive antibiotics to prevent them from getting sick. This is known as prophylaxis (pro-fuh-lak-sis). Examples of close contacts include:

- People in the same household or roommates
- Anyone with direct contact with a patient's oral secretions (saliva or spit), such as a boyfriend or girlfriend

The above information was retrieved from the Center for Disease Control:

<https://www.cdc.gov/meningococcal/index.html>