

Important Reminder: According to the college policy, all freshman and sophomore students are required to live on campus.

Personal Information

Last Name		First Name		Middle Initial
Canisius ID#	Month	Day	Year	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Permanent Home Mailing Address		City	State	Zip
Home Phone Number	Cell Phone Number	E-mail Address	Expected Graduation Year	

I wish to enter the Residence Halls in: Fall Spring Summer | Year: _____

Do you require special housing due to health or physical disability? Yes No

Special Housing Program

None Snowbound I Snowbound II

Building and Room Preference

Delavan Townhouses Dugan Hall (sophomores only) Village Townhouses
 Bosch Hall (freshman only) Frisch Hall (freshman only)

Name(s) of Preferred Roommate(s):

Lifestyle Preferences (check all that apply)

Sleep Habits: Morning Person Evening Person Flexible | **Neatness:** Very Neat Person Unorganized Person Flexible
Quiet: Quiet Person Moderate Person Loud Person Flexible Person | **Smoking:** Smoker Non-Smoker Could Live with a Smoker

Emergency Contact Information

Medical – Do you have any chronic illness or physical disability? Yes No

If yes, please attach a physician’s statement. A copy will be forwarded to the Student Health Office.

In case of emergency, please contact:

Name		Relationship		E-mail Address
Home Phone Number	Work Phone Number	Cell Phone Number		
Home Mailing Address		City	State	Zip

I understand that acceptance of this application is not to be construed as academic admission to Canisius College. I certify that the information given is complete and accurate to the best of my knowledge.

Signature _____ Date _____