

Housing Form

Today's Date: ____/____/____ Incoming Semester: Fall 20____ Spring 20____
Full Name: _____
Birthdate: ____/____/____ Gender: _____ Cell Phone: (____) _____
Hometown: _____ (City, State) Email: _____

All full-time single students under 24 years of age are required to reside in the residence halls or live with their parents within the 50-mile radius of KCU. Any special arrangements must be approved by the Director of Student Services.

Student Classification: ____ Freshmen ____ Transfer ____ Re-Applicant ____ Non-Traditional
Marital Status: ____ Single ____ Married ____ Divorced ____ Widowed
Housing Preference: ____ KCU Residence Halls ____ Commuting ____ KCU Apartments

PLEASE FILL OUT IF YOU WILL BE LIVING IN RESIDENCE HALLS:

If there is a current or incoming KCU student that you would like to room with, please print their name:

Will you be a KCU athlete? ____ Yes ____ No If so, which sport _____

Would you be interested in living with a roommate who has a support animal? ____ Yes ____ No

Allergies: _____

Physical disabilities that we need to be aware of: _____

You and your requested roommate MUST turn in this residential sheet AND the \$100 housing deposit by June 1, 2020 to receive priority housing and for your request to be considered.

A \$100 non-refundable deposit must accompany this form in order to reserve a dorm room. You may send this form in without a deposit, but a room will NOT be reserved until the deposit is paid.

PLEASE FILL OUT IF YOU WILL BE COMMUTING:

Please list the address below you will be commuting from:

Street Address: _____

City: _____ State: _____ Zip Code: _____

IF YOU WOULD LIKE TO LIVE IN THE KCU APARTMENTS:

Please request a KCU Apartment Application or contact the Apartment Manager – Daniel White at 606.474.3111 or dwhite@kcu.edu.



Today's Date: ____/____/____

STUDENT INFORMATION

Gender: Male _____ Female _____

Date of Birth: ____/____/____

Student's Full Name: _____

Cell Number: () _____ Social Security Number: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Sports of Participation: _____

Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Widowed

PARENT INFORMATION

Father/Guardian Name: _____ Mother/Guardian Name: _____

Employer: _____ Employer: _____

Cell Phone: () _____ Cell Phone: () _____

Work Phone: () _____ Work Phone: () _____

EMERGENCY CONTACT

In case parents/guardians/spouse are unable to be notified in the event of an emergency, who is your contact?

Name: _____ Relationship: _____

Cell Number: () Work Number: ()

SPOUSE INFORMATION

Spouse Name: _____ Spouse Cell Number: (____) _____

Employer: _____ Employer Phone: (____) _____

PERSONAL HEALTH INFORMATION

1. Intermediate Family History (Parents, Siblings)

[illegible]

2. Student Current Medications (Includes Psychotropic, OTC, Vitamins, Supplements)

Drug Name	Dose & Frequency	Reason

3. Student Allergies (Medications, Foods, Environmental)

Allergic To	Reaction	Treatment

4. Student Medical History

	Yes	No		Yes	No		Yes	No
Anemia/Blood Disease			Rupture/Hernia			Bone/Joint Deformity		
Concussion			Rheumatic Fever			Eye Disease		
Hepatitis			Stomach/Intestinal			Mononucleosis		
Meningitis			Cancer			Kidney Problems		

Please explain any YES answer: _____

5. Student Illness or Problems

Heart Disease (hypertension, etc.) _____

Endocrine problem (thyroid, diabetes, etc.) _____

Epilepsy (seizure disorder) _____

Pulmonary problem (bronchitis, asthma, pneumonia, etc.) _____

Other _____

6. Student Mental Health Care

Eating Disorder (anorexia, bulimia) _____

Mood Disorder (depression/bipolar disorder, etc.) _____

Anxiety Disorder _____

Suicide Attempt (dates) _____

Alcohol/Drug Treatments (dates) _____

Outpatient/Inpatient History (diagnosis, dates): _____

7. Student Previous Hospitalizations/Operations

Date	Reason

I certify that all the information provided is complete and accurate to the best of my knowledge.

Student Signature: _____ Date: _____

REQUIRED INFORMATION ON VACCINATION ABOUT MENINGITIS

Pursuant to Kentucky Legislature House bill #342 effective July 1, 2004, KCU Campus Housing is required to provide vaccination information about meningitis to full-time students living in resident housing. Meningococcal meningitis is a rare, but potentially fatal, bacterial infection. The disease is expressed as meningococcal meningitis, the presence of bacteria in the blood. The meningitis vaccine is not available on campus, but is available at the Carter County Health Department. To make an appointment, students should call 606.474.5109. There is a \$26 fee. Please visit www.cdc.gov for more information. Please check the appropriate statement below. The information provided will be kept confidential.

_____ Yes, I have had the meningitis vaccination. If yes, provide the date: _____

_____ No, I have not had the meningitis vaccination.

IMMUNIZATIONS

The following immunizations are required for KCU enrollment.

Everything in this box needs to be filled out by a health care provider OR a copy of your immunization record must be attached to this form listing all required immunizations.

Meningococcal Meningitis (RECOMMENDED)	Month	Day	Year
Vaccination: Yes _____ No _____			
Tetanus-Diptheria-Pertussis	Month	Day	Year
One time dose of Tdap (within past 10 years)			
M.M.R. Measles, Mumps, Rubella	Month	Day	Year
Dose 1- immunized on or after 12 months of age			
Dose 2- immunized after 1987 – provide proof of confirmed disease or immune titer if needed			
Tuberculosis	Month	Day	Year
PPD (mantoux) test within past year	Given:		
Results: _____ *If positive, see below chart	Read:		

*If positive PPD. Chest x-ray required. Give date and results of chest x-ray: _____

**Had BCG vaccine. Chest x-ray required. Give date and results of chest x-ray: _____

By signing below, I acknowledge that the information above is accurate and complete.

Family Physician: _____ Phone: (_____) _____

Address: _____

Health Care Provider Signature: _____ Date: ____/____/____

Vehicle Registration

Today's Date: ____/____/____

Full Name: _____

I will be having a car on campus: Yes _____ No _____

If yes, please fill out the information below:

Car Make & Model: _____
(Example: Ford Focus or Honda Civic)

Car Year: _____ Car Color: _____

License Plate Number: _____ State: _____

Type: _____Dorm _____Commuter _____Apartment _____Faculty/Staff

STUDENT SERVICES OFFICE USE ONLY

KCU Student ID Number: _____

KCU Decal Number: _____

Decal Color: _____

Lifestyle Statement & Conduct Guidelines

LIFESTYLE EXPECTATIONS

KCU is a Christ-centered, educational community. Communities function best when their members understand and abide by established standards of lifestyle and conduct, followed not by force of others, but out of each individual's willingness to take personal responsibility for him or herself, as well as for the well-being of the community (1 Corinthians 10:23-33). Members of the KCU community accept the Bible as the inspired word of God and the final authority in all matters of faith and life.

As a University, we seek to keep Christ at the center of all our interactions, which will show in the life of our campus employees and students. Personal conduct should follow Biblical principles in speech, attitudes, and behavior (Colossians 3:12-17).

KCU has the responsibility of maintain an environment conducive to learning and Christ-centered community living. KCU, therefore, reserves the right to discipline any student whose conduct is contrary to its purpose and standards.

CONDUCT GUIDELINES

Specific disciplinary consequences for the following behaviors are explained in the KCU Student Handbook. As members of the KCU community, students are expected to take personal responsibility for the following areas:

- **INTEGRITY** - Honesty and respect for all members of the KCU community is required. This includes abstaining from any form of stealing, cheating, slander, or obscene language.
- **SOBRIETY** - Under no circumstances is the use, possession, or distribution of illegal drugs permitted. Alcohol is not permitted on campus, in campus-owned housing, or any university-related activity.
- **SEXUAL PURITY** - Any form of sexual immorality is prohibited – including but not limited to, premarital sex, adultery, homosexual acts, and the use of pornography.
- **TOBACCO-FREE ENVIRONMENT** - Vaping, as well as the use of tobacco products in any form, is not allowed on campus, in campus-owned housing, or at any university-related activity.
- **PERSONAL SAFETY** - Assaulting, harassing, or endangering (in any manner) the health and safety of any person is prohibited.

Compliance with local, state, and federal laws, as well as the regulations in the KCU Student Handbook is expected of every student.

I understand the above expectations and guidelines and agree to abide to them. I further understand my signing this document is required for enrollment at KCU.

In special circumstances such as a disciplinary situation which results in limited or restricted access to any part of campus, whether initiated by the University or other authority, I acknowledge that KCU has permission to contact my parents/guardians or spouse with such information on my behalf.

Print Name: _____ Date: _____

Signature: _____

The Student Handbook is prepared by the Student Services Office and is an official statement of regulations for KCU. Each student is responsible for reading and respecting the guidelines and regulations stated therein. The information contained in the handbook is accurate as of 8/8/2016. By signing this form, the student acknowledges the student handbook is available online and commits to following the guidelines therein.

The requirements, rules and provisions stated in the Student Handbook and other publications of KCU are subject to change or modifications at any time without notice. The Handbook is reviewed each summer and updates posted on www.kcu.edu.

Federal Mandates

PLEASE READ CAREFULLY & INITIAL BESIDE EACH SECTION

RELEASE OF DIRECTORY INFORMATION

In accordance with the Family Educational Rights and Privacy Act (FERPA), KCU designates the following items as Directory Information: student name, address, telephone number, email address, date and place of birth, major field of study, dates of attendance, degrees and awards received, photographic image, and most recent previous school attended. The University may disclose any of those items without prior written consent. Students may present release of any or all of the above-listed information by submitting a signed for the Registrar's Office prior to the close of the add/drop period of the term in which you wish the information to be withheld.

Initial 

ON-CAMPUS HOUSING DISCLOSURE FORM

In compliance with Kentucky State Legislation KRS 164.9492- An Act Relating to Fire Safety, KCU is informing students living in Dale, Waters, and Pifer Halls, and Campus Apartments that the living units are not equipped with an automatic fire suppression system. For those students living in East and West Halls these living units are equipped with an automatic fire suppression system. All of these units are equipped with smoke detectors and fire alarm systems. The Act also requires the disclosure statement be signed by the student and a representative of the University. This form will be maintained by the University and be available to the state fire marshal or the local fire department upon request.

Initial 

ILLEGAL DOWNLOADING OF MATERIALS

The Federal Government has passed laws to prohibit the illegal downloading of materials over the internet. KCU has been charged with informing all students of the law and its penalties.

You should understand that if you are guilty of copy right infringement through the downloading of copyrighted materials you will be subject to the penalties set forth in the guidelines of the U.S. Government.

Following is a summary of civil and criminal penalties for violation of Federal copyright laws:

Copyright infringement is the act of exercising, without permission or legal authority, one of more of the exclusive right granted to the copyright owner under section 106 of the Copyright Act (Title 17 of the United State Code). These rights include the right to reproduce or distribute a copyrighted work. In the file sharing context, downloading or uploading substantial parts of a copyrighted work without the authority constitutes an infringement.

Penalties for copyright infringement include civil and criminal penalties. In general, anyone found liable for civil copy-right infringement may be ordered to pay either actual damages or "statutory" damages affixed at not less than \$750 and not more than \$30,000 per work infringed. For "willful" infringement, a court may award up to \$150,000 per work infringed. A court can, in its discretion, also assess costs and attorneys' fees. For details, see Title 17, United States Code, Sections 504, 505. Willful copyright infringement can also result in criminal penalties, including imprisonment of up to five years and fines of up to \$250,000 per offense.

Initial 

Print Name: _____ Date: _____

Signature: _____