

OFFICE USE ONLY

Date received \_\_\_\_\_ Ch # \_\_\_\_\_ No Money \_\_\_\_\_



## HOUSING APPLICATION

Please use black or blue ink and print clearly when completing this application. Thank you!



### Personal Information (Please print. Use BLACK or BLUE INK.)

Name: \_\_\_\_\_ Butler ID: @ \_\_\_\_\_  
Last (Family), First, Middle:

Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Permanent Address: Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ County: \_\_\_\_\_

Student Cell Phone: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

High School last attended: \_\_\_\_\_ Country of origin: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Year applying for \_\_\_\_\_  Fall  Spring  Summer Email address: \_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No **Applicant must initial** \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

### Lifestyle

**Housing preference:**  East (Male)  Cummins Hall (Female)  West (Male)  Apartments (Female)  
 Villa Apartments (If this is your only housing preference, \$25 application fee payable to The Villas at Butler)

**I am a:**  Smoker  Non-smoker  Smokeless tobacco **Room temperature preference:**  Hot  Medium  Cold

Early to Bed  Night Owl  Early Riser  Sleep Late **Noise Level:**  Quiet  Average  Loud

Neat Person  Casual  Messy Person **Are you willing to live with a smoker?**  Yes  No

**Entertain in Apartment:**  Often  Sometimes  Never **Study Habits:**  Frequently  Occasionally  Rarely

Disability Housing Accommodations  Yes  No If yes, please explain \_\_\_\_\_

Requested Roommate(s): \_\_\_\_\_

### Awarded Activity Scholarship

M Basketball  W Basketball  Football  CC/Track  Baseball  Softball

Trainer  Spirit Squad  Dance Team  Volleyball  Women's Soccer  Student Government

Fine Arts:  Vocal  Instrumental  Theatre/Drama  Mass Comm.  Other \_\_\_\_\_

- Please notify the Residence Life office if Activity scholarship is awarded after completion of Housing Application (316) 322-3295
- (Required) I have applied for admission and have been accepted at Butler Community College.
  - (Required) I am applying for housing at Butler Community College and have enclosed my \$25 application fee to indicate that my intentions are in earnest. I understand the \$100.00 security deposit will be applied to my account at time of placement. I am enrolling in 12 or more credit hours and understand that I must maintain at least 12 credit hours to remain in on-campus housing.
  - (Required) I have turned in a copy of my required immunization records.
  - (Required) In the event that I am placed at the Grizzly Villas and have submitted my \$25 housing application fee to Butler Community College, I authorize Butler Community College to forward my \$25 housing application fee to the Grizzly Villas

**\*\*\*All above requirements MUST be met before the student will be considered for placement in BCC housing. Meeting these above requirements does not guarantee housing placement.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

I authorize the above-named parent/guardian to obtain any information relating to my activities at Butler Community College. This information may include such records as academic attendance, academic achievement, and other details pertaining to my methods/amount of payments collected or needing to be collected. Copies of this authorization are as valid as the original release signed by me. This authorization is valid for two (2) years from the date signed.

(OVER)

## Required Immunizations

You are required to fax immunizations to 316-323-6885 or mail to 2415 W. Towanda Avenue, El Dorado, KS 67042

MMR1/MMR2 shots  
Current Tetanus Shot (within the last 10 years)  
Meningococcal Vaccine  
TB Test

This documentation is required as a part of a completed housing application.

## Placement Process

Applicants will be notified of placement via the email given on this application by June 1st. Applicants placed will have two weeks to return a completed housing placement packet to guarantee their room. If applicants fail to receive an assignment by June 1, they maintain their place on the waiting list by leaving a deposit. Refunds are granted by written request only, which removes the student's name from consideration. Once Butler has assigned/reserved a room in your name, your deposit will not be refunded. Spring Semester deposit refunds can be processed up until the 2nd week of classes. Any requests made after this date will not be processed for a refund. All refunds must be requested in writing by the student through the Accounts Receivable Office. For refund information contact Accounts Receivable at 316-322-3184.

## International Students

International students besides paying their deposit must pay for the entire Fall Semester by August 1st or Spring Semester by January 1st to have a space saved for you. If you pay and decide not to live in the halls and notification is received after August 1st or January 1st, you will receive a full refund only if Butler can fill the space saved for you, otherwise there shall be no refund.

## Student Code of Conduct & Residence Life Policies

All residents are expected to comply with all policies and procedures as stated in the Student Code of Conduct in the Student and Residence Life Handbooks. Butler has the right to refuse residence life placement to students who have previously been placed on probation or suspension for any previous violations of the Student Code of Conduct or Residence Life policies.

## Notice of Nondiscrimination

Butler Community College is committed to nondiscrimination on the basis of gender, race, color, national origin, age, religion, mental or physical disability, marital or parental status, or status as a veteran. This includes, but is not limited to admissions, employment, financial assistance, placement, recruitment, and educational programs or activities, as required by applicable laws and regulations. Lack of English language skill is not a barrier to admission and participation in educational programs and activities. Any person having inquiries regarding special needs, support services, or Butler Community College's compliance with the regulations implementing Title VI, Title IX and the Americans with Disabilities Act of 1990 is directed to contact the coordinators who have been designated to coordinate the educational institution's efforts to comply with the regulations implementing these laws.

### Coordinator For: Title IX

Title IX Coordinator  
901 S Haverhill Rd  
El Dorado, KS 67042  
(316) 323-6942 (Local)  
(316) 218-6942 (Wichita/Metro)

### Section 504

Disability Services Director  
901 S Haverhill Road  
El Dorado, KS 67042  
(316) 322-3321 (Local)  
(316) 733-3321 (Wichita/Metro)

Title VI, Title IX and Section 504 ADA complaints may also be filed with the Regional Office for Civil Rights.

### Address correspondence to:

U.S. Department of Education  
Region VII Office for Civil Rights  
10220 North Executive Hills Boulevard  
Kansas City, MO 64153

Please send this completed application with check or money order for \$25.00 payable to Butler Community College.  
Mail to: Accounts Receivable, Butler Community College, 901 S. Haverhill Road, El Dorado, KS 67042

If you have any questions, please call:

Accounts Receivable	(316) 322-3184
Residence Life	(316) 322-3295
Admissions Department	(316) 322-3255
Disability Services	(316) 322-3321

**\*\*THE FOLLOWING INFORMATION IS REQUIRED IN ORDER TO PROCESS THE APPLICATION FOR THE VILLAS ONLY\*\***

**Ownership or Landlord History**

Current Address \_\_\_\_\_

Permanent Address \_\_\_\_\_

Current City \_\_\_\_\_

Permanent City \_\_\_\_\_

Current State \_\_\_\_\_

Permanent State \_\_\_\_\_

Current Zip \_\_\_\_\_

Permanent Zip \_\_\_\_\_

Rent  Own How Long? \_\_\_\_\_

Rent  Own How Long? \_\_\_\_\_

Landlord Name \_\_\_\_\_

Landlord Name \_\_\_\_\_

Landlord Phone # \_\_\_\_\_

Landlord Phone # \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Income (Please Supply Documentation for All Income)**

**\*\*Will you be applying for Financial Aid at Butler Community College?  Yes  No**

**Current Employer (If a new employer, submit a letter of employment from the company with details.)**

Employer Name \_\_\_\_\_

Supervisor Name \_\_\_\_\_

Employer Work # \_\_\_\_\_

# of Years Employed \_\_\_\_\_

Work Address \_\_\_\_\_

Position \_\_\_\_\_  Full Time  Part Time

\_\_\_\_\_

Salary Per Month \$ \_\_\_\_\_

Other Income \_\_\_\_\_

Amount \$ \_\_\_\_\_

**Previous Employer (Employers older than 5 years do not need to be supplied)**

Employer Name \_\_\_\_\_

Supervisor Name \_\_\_\_\_

Employer Work # \_\_\_\_\_

# of Years Employed \_\_\_\_\_

Work Address \_\_\_\_\_

Position \_\_\_\_\_  Full Time  Part Time

\_\_\_\_\_

Salary Per Month \$ \_\_\_\_\_

Other Income \_\_\_\_\_

Amount \$ \_\_\_\_\_

**Vehicle Information (List ownership of cars, trucks, vans, trailers, boats, RV's, motorcycles, motor bikes, etc.)**

Make \_\_\_\_\_ License # \_\_\_\_\_ Make \_\_\_\_\_ License # \_\_\_\_\_

I, the **UNDERSIGNED APPLICANT**, affirm that the information contained in this application is true and correct, and I authorize Villa's Student Community, to verify all information contained in this application and that it may be shared with Butler Community College. Misstatements, either false or incorrect are reason for denial of occupancy. I also understand that if I rent from Villa's Student Community, and I fail to fulfill my obligations, Villa's Student Community can submit a negative credit report reflecting my rental history to a credit-reporting agency. I understand this application is the property of Villa's Student Community and authorize Butler Community College to forward my \$25 housing application fee to the Grizzly Villas.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_