



HOUSING APPLICATION FOR BRIDGEPATHWAYS® AT CMU

PLEASE PRINT LEGIBLY IN BLACK INK

Term and Year of Expected Enrollment at BridgePathways®: ☐ Fall 1 ☐ Fall 2 ☐ Spring 1 ☐ Spring 2 ☐ Summer 1 ☐ Summer 2 Year: _____

Are you applying for conditional admission to Colorado Mesa University? ☐ Yes ☐ No

If yes, please complete the admission application to CMU (coloradomesa.edu/international) and submit all supporting documentation, less English proficiency.

Full Legal Name: (Last) _____ (First) _____ (Middle) _____ (Maiden/Former Name) _____
 (as it appears on your passport)

Birth Date (please write out month) _____ Present Age _____ E-mail Address _____ Phone Number _____
 (Please provide to allow us to communicate with you electronically and streamline the process.) (include country code)

Permanent Address (Street) _____ (Apt.#) _____ (City/Town) _____ (Postal Code) _____ (Street/Province) _____ Country _____

Current Mailing Address (Street) _____ (Apt.#) _____ (City/Town) _____ (Postal Code) _____ (Street/Province) _____ Country _____
 (if different than permanent address)

What is your biological gender? ☐ Male ☐ Female ☐ Other _____ What is your self-identified gender? ☐ Male ☐ Female ☐ Other _____

Nation of Citizenship _____ Nation of Birth _____

Citizenship status: ☐ U.S. Citizen ☐ Permanent Resident ☐ Non Resident (F-1, J-1, etc.), If non-resident, what U.S. immigration status do you hold or plan to hold? (F-1, J-1, etc.) _____
☐ Undocumented

EDUCATIONAL HISTORY

Secondary:

Secondary School Name _____ Address _____ City _____ State/Province _____ Postal Code _____ Country _____

Date of completion _____

College:

List all college(s) you have attended or are currently attending.

Dates of attendance	Name of College/University	City, State/Province, Country	Degree completed, if any
_____ to _____ mm yy	_____	_____	_____
_____ to _____ mm yy	_____	_____	_____
_____ to _____ mm yy	_____	_____	_____

RESIDENCE PREFERENCES

Do you work best in a quiet study environment? ☐ Yes ☐ No

Do you consider yourself primarily an early riser or a late night person? _____

At what location (room, library, off-campus, etc.) will you primarily study? _____

Do you prefer a room that is neat and organized? ☐ Yes ☐ Not important to me

What time of day do you prefer to study? _____

Do you smoke? (All Halls and Apartments are non-smoking facilities.) ☐ Yes ☐ No

Please list top 3 hobbies/interests. 1. _____ 2. _____ 3. _____

If you would like to request a roommate, please list their full name and birth date here. _____



Have you received the meningitis vaccine? The vaccine is not required. However, you are required to select whether or not you have received the vaccine. ☐ Yes ☐ No

ADA- Accommodation of Physical/Medical Conditions: Prior notification is necessary to evaluate and accommodate your individual needs. Please provide a statement describing your condition and needed accommodations. If none or not applicable please leave blank.

EMERGENCY CONTACT INFORMATION

PLEASE PROVIDE THE FOLLOWING INFORMATION FOR SOMEONE **WHO SPEAKS ENGLISH** THAT COULD BE CONTACTED IN THE EVENT OF AN EMERGENCY

Relationship	First Name	Last Name
Email		
International Phone Number (include country code)		Additional Phone Number

Additional Emergency Contact:

Relationship	First Name	Last Name
Email		
International Phone Number (include country code)		Additional Phone Number

Do you have any pending criminal charge(s) OR have you ever been convicted of a felony or misdemeanor, made a plea of guilty, accepted a deferred judgment, been adjudicated a juvenile delinquent or required to register as a sex offender? You need not disclose traffic infractions, but must disclose alcohol and/or drug related traffic offenses. ☐ Yes ☐ No

If you answered yes, please **ATTACH** a detailed, concise explanation including the date, charge(s), penalty/judgment and what you learned from the experience.

During your educational career, have you ever been placed on probation, suspended or expelled for anything other than academic reasons? This includes any high school or postsecondary school. ☐ Yes ☐ No

If you answered yes, please **ATTACH** an explanation stating the reason(s), resulting consequence(s) and how it was resolved.

I certify that the information furnished in this application is true and complete to the best of my knowledge. I understand that any misinformation, disinformation, or omission of information may jeopardize my status or be grounds for rejection or dismissal from University housing.

Signature of APPLICANT _____ Date _____

Return completed form by email to: agingeri@coloradomesa.edu