

HARIRI CANADIAN UNIVERSITY

Residence Hall Application form to be filled & returned to Administration Office

Paste recent colored photograph
Passport-size

Applied for: Semester Fall ___ / ___ Spring ___ / ___
 Session Summer I ___ / ___ Summer II ___ / ___
 Freshman Sophomore Junior Senior Graduate

GENERAL INFORMATION

ID#

1. Full Name _____
 (First) (Father's Name) (Family)

2. Mother's full maiden name: _____

3. Personal Status: Gender Male Female

4. Marital Status: Single Married Others _____

5. Date & Place of Birth: (Day/Month/Year) _____ (Place) _____

6. Nationality (according to Identity card or passport) _____
 (At birth) (Current) (Second if any)

7. Mailing Address (Bldg.) _____ (Str.) _____ (P.O.Box) _____
 (City) _____ (Country) _____
 (Phone) _____ (Mobile) _____ (E-mail) _____

8. Medical Information Blood Type A+ A- B+ B- AB+ AB- O- O+

Please List any allergies or medical problems you may have (ex: Penicillin, Aspirin, Diabetes etc...)

9. Guardian (Name) _____ (Family) _____
 (Phone) _____ (Mobile) _____
 Address _____

10. Name of person(s) to contact in case of emergency

Name	Relationship	Telephone #

11. Accommodation Preferences Single Room Double Room
In a shared Apartment *In a shared Apartment*
Upon availability *(\$600/Fall or Spring) (\$225/Su I or II)*
 (\$900/ Fall or Spring) (\$350/ Su I or II)

» I have read & agreed to abide by the Residence Hall rules and regulations which are set by the Residence Hall Handbook.
 » I understand that with this application, I must pay L.L.//225,000// registration fee to reserve a room in addition to L.L. //300,000// refundable deposit for new resident
 » Dorms fees are non refundable under any circumstances and for any reasons.

Signature: _____

Date : _____