## **Messenger College Housing Application**

**TX Residential Program** | P.O. BOX 1207. EULESS, TX 76039 | 817-554-5950

Student Information	<b>1:</b> (please print)			
Name:		OLLI (		
LAST	FIRST	MIDDLE	0/	MAIDEN NAME (if applicable
Current Address:	IG ADDRESS	CITY	STATE	ZIP + 4
Age:	Gender:	Height:		Weight:
Housing Request:				
	•	old, less than 90 credit hour live in residential housing.	rs, and has n	ot lived in the DFW area
☐ <b>Double Occupancy (two st</b> Development Staff based on the		om) \$1,675 per semester. **Roor application.	mmate will be o	chosen by Student
	returning student	) \$2,460 per semester. **Please is and based on availability. If you	•	
last <u>two years</u> .		if you have been involve		ollowing activities in t
Smoking/Tobacco Use	☐ Yes ☐ No	If yes, explain:		<del>'</del>
Pornography	☐ Yes ☐ No	If yes, explain:		
Homosexuality	☐ Yes ☐ No	If yes, explain:		
Abuse (sexual/domestic)	☐ Yes ☐ No	If yes, explain:		
Cult/Occult Practices	☐ Yes ☐ No	If yes, explain:		
Alcohol Use/Consumption	☐ Yes ☐ No	If yes, explain:		
Illegal Drug Use/Possession	☐ Yes ☐ No	If yes, explain:		
Fornication/Adultery		If yes, explain:		
Been arrested?		If yes, explain:		
If yes, explain:		counsel for a mental or emotion		
Please list any health issues, whi	ich require special	attention or might limit your part	ticipation in an	y aspect of college life:

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

<sup>\*\*</sup>Please note that Messenger College does not provide health or renter's insurance. We encourage all our students to have health and renter's insurance upon arrive to Messenger College. Messenger College is not responsible for any personal property damage.

## **Spiritual Health:**

Parent or Guardian:

· · · · · · · · · · · · · · · · · · ·		1-2-3-4-5-6-7-8-9	9 – 10 (I am perfect!) 5 are important to you? Explain.
Emergency Contact:	(please print)	ER Co	
Name:	00		
Current Address:	FIRST	MIDDLE	MAIDEN NAME (if applicable)
Phone Number:	3/	Relationship:	1.01
	ve will only cont <mark>act</mark> this p	erson incase of an emergency.	
Christian principles to their individual is required to mal held accountable by the coll- the College's sole judgment,	everyday l <mark>iving. The rea</mark> ke choices in the areas o ege community. Messen does not conform either	ality of college life, both on ar of thought, behavior and lifes ger College reserves the righ or to the stated regulations go	at their Christian faith by applying and off campus, is that each atyle; to be self-disciplined; and to be at to discipline any student who, in everning student conduct or to the in the MC Student Handbook.
messengercollege.populiweb.com Business at aheppner@messenge I understand I must complete to (see box below).	n and pay \$250 on your student a ercollege.edu for assistance. Pleas he MC Health Form and I under	se do not submit as a donation, as it is nerstand I must meet the Texas Vaccinat	amount due. Please contact Angela Heppner, VP of oot tax-deductible. Electronic check is preferred.
Signature of Student:	PRI		Date:
Parent or guardian must also		gle and under 18 years of age the Colleae.	at the time this form is submitted to

\*\*If you have any questions or concerns please contact the Student Development Offices at <a href="mailto:studentdevelopment@messengercollege.edu">studentdevelopment@messengercollege.edu</a> or 817-554-5950 ext. 103. You may send your signed Health Forms via e-mail or snail mail: P.O BOX 1207 Euless, TX 76039

## TEXAS MINIMUM STATE VACCINE REQUIREMENTS FOR COLLEGE ENTRY

All entering students at Messenger College are required to show proof of vaccination/immunizations during the five-year period prior to enrolling. Students attending in the TX Residential Program must get the Meningococcal vaccination at least 10 days before the semester beings and the Tuberculin (TB) Skin Test within the last year. A licensed physician must sign this form along with a copy of your immunization history. This Health Form is for use by the Messenger College Administration. The contents of this record are kept confidential and will not be released without your written consent.

Please complete this form in its entirety.