

Messenger College Housing Application

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

Student Information: *(please print)*

Name: _____
LAST FIRST MIDDLE MAIDEN NAME (if applicable)
Current Address: _____
MAILING ADDRESS CITY STATE ZIP + 4
Age: _____ Gender: _____ Height: _____ Weight: _____

Housing Request:

****All students under the age of 24 years old, less than 90 credit hours, and has not lived in the DFW area prior to Messenger College is required to live in residential housing.**

☐ **Double Occupancy (two students per bedroom) \$2,300 per semester.** **Roommate will be chosen by Student Development Staff based on the criteria of your application.

☐ **Single Occupancy (one student per bedroom) \$3,300 per semester.** **Please note, this option is only granted by the Student Development staff for returning students and based on availability. If you feel you need a private room (single occupancy) please explain your reasons below:

Student History: Please indicate if you have been involved in the following activities in the last two years.

Smoking/Tobacco Use ☐ Yes ☐ No If yes, explain: _____
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 ☐ Yes ☐ No If yes, explain: _____
Been arrested? ☐ Yes ☐ No If yes, explain: _____

Have you ever sought psychiatric/professional counsel for a mental or emotional condition? ☐ Yes ☐ No

If yes, explain: _____

Please list any health issues, which require special attention or might limit your participation in any aspect of college life: _____

Health Care Provider: _____ Policy # _____
Address: _____ Phone # _____

****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:

- Rate your relationship with God. (Who is he?) 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10 (I am perfect!)
- How do you grow in your relationship with Christ? What Spiritual Disciplines are important to you? Explain.

Emergency Contact: *(please print)*

Name: _____

LAST FIRST MIDDLE MAIDEN NAME (if applicable)

Current Address: _____

Phone Number: _____ Relationship: _____

***Due to FERPA regulations we will only contact this person in case of an emergency.*

MC Texas Residential Housing Standards

It is expected that students who come to Messenger College will desire to live out their Christian faith by applying Christian principles to their everyday living. The reality of college life, both on and off campus, is that each individual is required to make choices in the areas of thought, behavior and lifestyle; to be self-disciplined; and to be held accountable by the college community. Messenger College reserves the right to discipline any student who, in the College's sole judgment, does not conform either to the stated regulations governing student conduct or to the expressed principles, policies, programs and expectations of the College located in the MC Student Handbook.

- ☐ I understand that a \$250 housing deposit is due PRIOR to my arrival. I understand that I can send it by check or pay online through messengercollege.populiweb.com and pay \$250 on my student account, even if it shows there is not an amount due. Please contact Angela Heppner, VP of Business at ahheppner@messengercollege.edu for assistance. Electronic check is preferred.
- ☐ I understand I must complete the MC Health Form and I understand I must meet the Texas Vaccination requirements (see box below).
- ☐ I understand I must read the MC Student Handbook prior to arriving on campus. I understand there are Residential and Community Standards I must abide by.

Signature of Student: _____ Date: _____

Parent or guardian must also sign if the student is single and under 18 years of age at the time this form is submitted to the College.

Parent or Guardian: _____ Date: _____

****If you have any questions or concerns please contact the Student Development Offices at studentdevelopment@messengercollege.edu 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 begins 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.

Messenger College | New Student Housing Application

The purpose of this form is to aid our office in assigning you a compatible roommate. **This is to be completed by YOU – not your parent or guardian.** The more we know about your personality and preferences, the easier it is for us to place you. You have already been admitted and will not be judged on your responses so please answer honestly and complete the entire form. Thanks!

I am: ☐ Planning to live in the MC Commons
☐ Planning to live off campus (please note off campus housing guidelines found in the Student Handbook)

Print full legal name: _____

Cell phone: (____) _____ Alternate summer phone: (____) _____

Personal email: _____ Parent email: _____

Roommate Request:

🔑 DOUBLE ROOM (\$2,300) ROOMMATE CHOICE _____

🔑 PLEASE ASSIGN MY ROOMMATE

For priority consideration, both you and your roommate must have your forms submitted by the priority deadline.

Matching Information:

The following information will help us make the best possible roommate match should your chosen or assigned roommate cancel between now and fall. Please circle only one number for each question.

ROOM

1. How important is it to you that your room is kept neat, clean and orderly? Not important...1...2...3...4...5...Very important
2. When/if you study in your room, will music or activity bother you? A lot...1...2...3...4...5...Not at all
3. What level of loudness is generally acceptable for electronics in the room? Like the library...1...2...3...4...5...Things fall off the walls
4. Are you kept awake by light, noise or activities in the room? Need quiet & darkness...1...2...3...4...5...Sleep through anything
5. Do you expect your room to be a place where people gather to relax/have fun? Never...1...2...3...4...5...Any time
6. What time do you expect to go to sleep on weeknights? 🕒10 p.m. 🕒11 p.m. 🕒12 a.m. 🕒1 a.m. 🕒2 a.m. 🕒After 2 a.m.
7. How much time do you plan to spend in your room? Very little...1...2...3...4...5...Most of my free time
8. How much time do you spend online? Very little...1...2...3...4...5...Most of my free time
9. Do you snore? 🕒1) Yes 🕒2) No
10. What is your preferred room temperature? 1) 65° 2) 67° 3) 70° 4) 73° 5) 75°

PERSONAL

11. How comfortable will you be with having a roommate's friend sleeping over? Not at all...1...2...3...4...5...Completely comfortable
12. How comfortable are you with sharing belongings (clothes, food, toiletries)? Not at all...1...2...3...4...5...Completely comfortable
13. Do you consider yourself an artistic/creative person? Not in the least...1...2...3...4...5...Yes, definitely

14. **Studying is:** One of many priorities...1...2...3...4...5...My highest priority
15. **How do others see you?** Withdrawn/introvert/quiet...1...2...3...4...5...Outgoing/social/very involved
16. **Indicate your regional background:** Small town...1...2...3...4...5...Big city
17. **How much have you traveled?** Never traveled...1...2...3...4...5...Extensive travel in US and abroad

SPIRITUALITY

18. **Where do you see yourself on your spiritual journey?** It's on the back burner...1...2...3...4...5...It's a high priority
19. **Indicate your level of participation in your local church or other ministry:**
Minimal involvement...1...2...3...4...5...I'm there every time the doors open/very involved

20. HOBBIES & INTERESTS (Check all that interest you)

- | | | | | |
|---|---|--|--|---|
| <input type="checkbox"/> Reading | <input type="checkbox"/> Scrapbooking/Crafts/Sewing | <input type="checkbox"/> Concerts | <input type="checkbox"/> Horses | <input type="checkbox"/> Politics |
| <input type="checkbox"/> Video Games | <input type="checkbox"/> Cooking/Baking/Eating | <input type="checkbox"/> Sporting Events | <input type="checkbox"/> Golf | <input type="checkbox"/> Foreign language |
| <input type="checkbox"/> Computers | <input type="checkbox"/> Nutrition | <input type="checkbox"/> Coffee Shops | <input type="checkbox"/> Water/Snow Sports | <input type="checkbox"/> Travel |
| <input type="checkbox"/> Board/Card Games | <input type="checkbox"/> Animals | <input type="checkbox"/> Paintball | <input type="checkbox"/> Exercise/Weights | <input type="checkbox"/> Cycling |
| <input type="checkbox"/> Writing | <input type="checkbox"/> Photography | <input type="checkbox"/> Hunting/Fishing | <input type="checkbox"/> Jogging/Running | <input type="checkbox"/> Skateboard/Surf |
| <input type="checkbox"/> Poetry/Compose Music | <input type="checkbox"/> Fashion/Shopping | <input type="checkbox"/> Camping | <input type="checkbox"/> Tennis | <input type="checkbox"/> Gymnastics/Dance |
| <input type="checkbox"/> Art | <input type="checkbox"/> Decorating | <input type="checkbox"/> Hike/Explore | <input type="checkbox"/> Pin pong | <input type="checkbox"/> Team Sports |

MUSIC

21. **Do you play an instrument?** ☐ Guitar/stringed ☐ Piano/keyboard ☐ Drums/percussion ☐ Brass ☐ Wind ☐ Vocal
22. **How important is music to you?** Take it or leave it...1...2...3...4...5...Listen/play often
23. **Check the music genre(s) that you most enjoy listening to:** ("Christian" can be represented in any genre or style of music.)
- | | | | | |
|--------------------------------------|---|-----------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Avant Garde | <input type="checkbox"/> Country | <input type="checkbox"/> Jazz | <input type="checkbox"/> Rap | <input type="checkbox"/> Oldies |
| <input type="checkbox"/> Blues | <input type="checkbox"/> Easy Listening | <input type="checkbox"/> Latin | <input type="checkbox"/> Reggae | <input type="checkbox"/> I like a wide variety of music |
| <input type="checkbox"/> Cajun | <input type="checkbox"/> Electronica | <input type="checkbox"/> New Age | <input type="checkbox"/> Soundtrack | <input type="checkbox"/> I prefer <u>only</u> Christian music |
| <input type="checkbox"/> Celtic | <input type="checkbox"/> Folk | <input type="checkbox"/> Pop/Rock | <input type="checkbox"/> Vocal | <input type="checkbox"/> Worship |
| <input type="checkbox"/> Comedy | <input type="checkbox"/> Gospel | <input type="checkbox"/> R&B | <input type="checkbox"/> World | |

By signing below, I acknowledge that my \$250 housing deposit has been paid or is enclosed with this form.

Student Signature: _____ **Date:** _____
