

# UTTC Residence Hall Application

**Mail Residence Hall Application to:** Residential Life Department

United Tribes Technical College

3315 University Drive Bismarck, ND 58504

Fax: 701-530-0613

Email: [residencelife@uttc.edu](mailto:residencelife@uttc.edu)

I am applying for Residence Hall:     Fall 20\_\_     Spring 20\_\_     Summer 20\_\_

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## Personal Information (Please Print or type)

Full Legal Name: \_\_\_\_\_  
(Last, First, Middle)

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
(Po Box or Street)

Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_     Male     Female

Tribe Affiliation (If Applicable): \_\_\_\_\_

Email: \_\_\_\_\_

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## Residence Hall Preferences

Students that reside on campus only: Please indicate your choice of residence hall. Every effort will be made to assign you to your preference: however it is not guaranteed.

**Halls:**     Itan'can Oyanke Leadership Lodge (Co-Ed)     Sitting Bull (Male)     Sakakawea Hall (Female)

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## Emergency Information (At least one contact is required)

Full name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work: \_\_\_\_\_

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Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_  
(Required if student is under 18)

**Residential Life**  
**ROOMMATE QUESTIONNAIRE**

Return with Housing Application  
(This form applies to Dorm Students only)

Please fill out the following information below. Since the office of Residential Life will use the information to assign roommates, **it is important that the form be filled out by the student.**

Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

**What time would you expect to wake up during weekdays?**

- 6:00am     7:00am     8:00am     9:00am     10:00am or later

**What time you expect to go to seep during the weekdays?**

- 8:00pm     9:00pm     10:00pm     11:00pm     12:00am or later

**In what condition do you maintain your room?**

- Organized     Sloppy     Fair

**What is the sound level that you prefer while you're studying?**

- Silence     Little Noise     Loud

**Do you consider yourself:**     Shy     Outgoing     Neutral     Loud

**If having guests in your room, are someone who anticipates:**

- Occasionally have a guest     frequently having guests     No guests at all

**How would you describe the activity level in your room?**

- Low     Some Activity     High Activity

**Will you be joining in a sport?**     Yes     No    **if yes, do you want to live with a teammate? YES NO**

**If you have already met someone that you would like to be your roommate, please list preferred roommate's full name:** (Roommate must be mutual and will be contingent upon space available and the date applications are turned in)

**1<sup>st</sup> Choice** \_\_\_\_\_ **2<sup>nd</sup> Choice** \_\_\_\_\_

**List some of your hobbies, interests or activities:**

\_\_\_\_\_

**Do you have any special needs concerning your Residence Hall assignment?**

\_\_\_\_\_