



## CONCORDIA UNIVERSITY EXCHANGE APPLICATION

**Return to: Lonnie Lee**

Concordia University  
1530 Concordia West  
Irvine, CA 92612-3203

Phone: 949-214-3062  
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*The following items must be submitted with this application form to seek admission:*

1. Application
2. Official Transcripts
3. Housing Form
4. Copy of Passport
5. Affidavit of Financial Support
6. Certification of Bank Balance
7. Health Form
8. Exchange Course Request Form

I am participating in the exchange program between Concordia University and:

- Curtin University, Australia
- Ecole Supérieure Libre des Sciences Commerciales Appliquées ESLSCA Paris, France
- Luther University South Korea
- Linton Global College/Hannam University Daejeon, Korea
- University of Ghana/Legon-Accra, Ghana
- Università Cattolica del Sacro Cuore/UCSC Milan, Italy

**Deadlines: Fall Semester – June 1<sup>st</sup>      Spring Semester – November 1<sup>st</sup>**

Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
                  Month      Day      Year

**Please type or print in ink. All items must be filled out**

**Application Section:**

Semester(s) planning to Enroll at Concordia University Irvine

- Fall Semester 20\_\_\_\_     Spring Semester 20\_\_\_\_  
 Undergraduate Program     MBA Program

Major \_\_\_\_\_

**Personal Information:**

Applicant Name

\_\_\_\_\_  
*Last/Surname                      First Name (Given Name)                      Middle                      Maiden/Other Name Used*

Email address(required) \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_    Gender:  Male  Female    Marital Status:  Married  Single  
                  Month      Day      Year

Citizenship:  USA  Permanent Resident  Other    Country of Citizenship: \_\_\_\_\_

Country of Birth: \_\_\_\_\_

**Permanent Home Address:**

Permanent Street Line 1 \_\_\_\_\_

Permanent Street Line 2 \_\_\_\_\_

Permanent City \_\_\_\_\_ Permanent State/Province \_\_\_\_\_

Permanent Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Country Code \_\_\_\_\_ City Code \_\_\_\_\_ Phone Number \_\_\_\_\_

Country Code \_\_\_\_\_ City Code \_\_\_\_\_ Fax Number \_\_\_\_\_

Country Code \_\_\_\_\_ City Code \_\_\_\_\_ Cell Number \_\_\_\_\_

**Emergency Contact Address:**

Name \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Permanent Street Line 1 \_\_\_\_\_

Permanent Street Line 2 \_\_\_\_\_

Permanent City \_\_\_\_\_ Permanent State/Province \_\_\_\_\_

Permanent Country \_\_\_\_\_

Country Code \_\_\_\_\_ City Code \_\_\_\_\_ Phone Number \_\_\_\_\_

Country Code \_\_\_\_\_ City Code \_\_\_\_\_ Fax Number \_\_\_\_\_

Country Code \_\_\_\_\_ City Code \_\_\_\_\_ Cell Number \_\_\_\_\_

**Housing:**

Do you plan to live on campus while studying at Concordia University?  YES  NO

I certify that the information furnished on this application is true and complete. I agree that, if accepted into the Exchange Program, I will abide by the rules and regulations of Concordia University as stated in the Student Handbook. I also understand that it is my responsibility to review the information and be aware of the policies outlines therein. I also understand that I am not eligible for financial aid for this program.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_



Office Use Only
Date Received: Building:
\$500 New Students: PAID Unit:
\$300 Returning Students: Meal Plan:

Application for Housing and License Agreement

Please type or print. Read this document carefully before signing as it contains legally binding obligations. We recommend that you keep a copy for your reference. If you have any questions about this application and license, please contact the Office of Residential Education and Services at (949) 854-8002 x1498.

New Students: The Office of Residential Education and Services accepts applications for on-campus housing after the University has received your \$500 enrollment confirmation advance payment. Out of this advance payment, \$300 goes towards your first semester housing costs. This advance payment is nonrefundable. Application deadline for priority placement is June 1, 2010.

Returning Students: Prior to submitting your application, please visit the Bursar's Office to pay your \$300 Room Reservation Advance Payment. This advance payment goes towards your fall semester housing costs and is nonrefundable. Applications will not be processed until payment is received.

Applicant Information (Please Print Clearly)

Name: Last Name First Name M.I. E#: Concordia Student ID Number
Mailing Address: E-mail Address:
City: State: Zip Code: Telephone:
Date of Birth: Gender: Male Female Cell Phone:

Current Class Standing: Freshman (New Student) Freshman (Returning) Sophomore Junior Senior Graduate
Are you a new transfer student (transferring at least 24 units from another college and/or university): Yes No
Are you a member of an official Concordia University athletic team: Yes No If yes, what sport?

Housing Preferences

Roommate / Suitemate Requests

The University considers requests for roommates and suitemates when all requests are mutual and are received prior to June 1, 2010. Persons of the opposite gender shall not be permitted to be assigned to the same room or unit.

Name of requested roommate: Unit Preferences (Rho & Sigma) Side A Side B
1.
Name of requested suitemate(s): (Upper & Lower Quads) Side Bedroom Back Bedroom
1.
2.

Super-Single Option (additional cost will apply)

I would be interested in a single room for the 2010-2011 academic year. I understand that if a single room is available and I am assigned to it, my housing charges will be 1.5 times the standard rate per semester.

Substance-Free Floors (Chi Rho & Theta only)

If you are interested in living on a substance-free floor, please indicate your selection below.
Rho Substance-Free Theta Substance-Free

Housing Location - Returning Residents ONLY

Rank your two preferences for housing location (#1 and #2)
Chi Rho Chi Sigma Upper Quads Lower Quads

Explanatory Note: A roommate is someone who will share the same bedroom / side of a suite. A suitemate is someone who will occupy a different bedroom within one apartment or suite.

Housing Placement Survey

Housing Services will consider your answers to the following questions in assigning your roommate and suitemate(s). (Circle those that apply)

- 1. Are you an: Early (before 8am) or Late (after 8am) riser; Early (before 11pm) or Late (after 11pm) to bed; Noisy or Quiet; Smoker or Non-smoker; Messy...Average...or Neat; A person who is willing to live with someone who smokes outside the room.
2. My study habits are: Morning...Midday...or Night; In-room...Library...Social Setting...a little noise...or silence
3. I am interested in (Hobbies are): Art/Photography...Reading...Community Service...Outdoor Activities...Sports...Student Leadership
4. My anticipated major is: 5. My favorite type of music is:
6. My top two areas of compatibility with my roommate are:

Emergency Contact Information

Last Name First Name M.I. Relation to applicant:
Home Phone: Cell Phone:

## I. Terms of License Agreement

This Agreement is made between the applicant and Concordia University Irvine, and contains the primary terms and conditions of occupancy. Additionally, the Student Code of Conduct, Student Handbook, Housing Handbook, and all other University publications apply and are fully incorporated into this Agreement. Student handbooks are available online. The Office of Residential Education and Services reserves the right to supplement, amend, elaborate or clarify this housing license agreement through the issuance of electronic or non-electronic memoranda, rules, regulations or directives during the period of occupancy defined by this Agreement.

The University grants the individual student permission to occupy a residence space in facilities owned/operated by Concordia University Irvine as a license on the terms and conditions contained herein, and upon proper completion of the Housing Application procedures. This Agreement obligates the student to pay all charges due and owing under the terms hereof for the full 2010-2011 academic year, which consists of the Fall and Spring terms. Applications will not be processed until a non-refundable \$300 advance payment is received by the University. This advance payment constitutes a housing reservation and is applied toward the total license agreement amount for the first semester of occupancy. Acceptance of this license does not guarantee assignment or reserve specific spaces. The only circumstance under which a licensee is eligible for a refund of this advance payment is if the University reaches maximum capacity and is unable to house additional students.

- A. University Residency Requirement:** Concordia University Irvine requires all full-time undergraduate students who will be 21 or younger as of Sunday, August 22, 2010 to live in on-campus housing. Students who will be 21 and under who desire to reside off-campus must appeal this requirement. Additional information regarding the appeals process can be obtained by contacting the Office of Residential Education and Services. Returning resident appeals must be submitted prior to June 1, 2010 for guaranteed consideration.
- B. Eligibility:** Students are eligible for housing if they are full-time enrolled undergraduate students of Concordia University Irvine for the entire academic year. Students who fail to register for classes by the deadline set by the University will not be eligible for housing. The University shall retain the sole and exclusive right to define what constitutes full-time, regular, and continuous enrollment.
- Part-time and graduate level students may be eligible for University housing on a "space available" basis at the sole discretion of the Office of Residential Education and Services.
  - Students 25 years of age and older as of Sunday, August 22, 2010 may not be eligible for on-campus housing.
  - Post-Baccalaureate student teachers are eligible for on-campus housing while they complete their student teaching assignments as long as they are not ineligible for on-campus housing due to their age.
  - Students who have been found responsible for violating Residential Education and Services (housing) and/or University policies may be denied on-campus housing.
- C. Anticipated Housing Rates:** Chi Rho and Chi Sigma, \$2400 per semester.  
Upper and Lower Quads, \$2600 per semester.  
(Rates are subject to change.)
- Super-Singles: If a student indicates a desire to occupy a single room ("super-single") and is placed into one, he/she will be charged the standard rate indicated above for their first space plus an additional 50% of the standard rates above for their second space. Students who are placed in a Super-Single housing assignment must fill out a separate Super-Single Agreement Form available in the Office of Residential Education and Services.
- D. No Tenancy:** This housing license agreement shall not constitute a tenancy. Residents shall have the non-exclusive license to use an assigned space during the term of this housing license agreement only, but shall not have the right to occupy any specific room or unit. This document is not a lease.
- E. Cancellation of Housing & License Agreement / Release Requests:**
- Licensee may cancel this Agreement if they will not be attending Concordia University during the 2010-2011 academic year. To cancel an Agreement, the licensee must notify the Office of Residential Education and Services by submitting a Cancellation of License Agreement Request Form. Forms received after August 1, 2010 will result in a \$250 License Agreement Cancellation Fee. Date of notification will be considered as the date that a form is postmarked.
  - Licensees entering housing for the first time at spring semester may cancel this Agreement if they will not be attending Concordia University during the spring 2011 semester. Notices of cancellation received after January 1, 2011 will result in a \$250 License Agreement Cancellation Fee. Date of notification will be considered as the date that a notice is postmarked.
  - After occupancy begins, the University will consider a request from licensee to release him/her from this Agreement if licensee encounters a severe financial, physical, or emotional hardship which is exacerbated by living on campus and cannot be remedied by alternative means. Licensees must submit a Cancellation of License Agreement Request Form to the Office of Residential Education with supporting documentation for consideration. The University reviews all requests on a bi-weekly basis and may grant or deny any and all requests. If a request is granted, licensee will be charged a \$250 License Agreement Cancellation Fee in addition to all contractual obligations and associated fees.
  - Licensees who withdraw from the University during the term of this Agreement may cancel this Agreement by notifying the Office of Residential Education and Services by submitting a Cancellation of License Agreement Request Form. The licensee will be charged a \$250 License Agreement Cancellation Fee in addition to all contractual obligations and associated fees.
  - Cancelling the contract between semesters will result in a \$250 License Agreement Cancellation Fee in addition to all contractual obligations and associated fees. This includes licensees who cancel when withdrawing from the University.
  - Licensees who were under 18 years of age when signing this Agreement may only request a cancellation of said Agreement when request is accompanied by the written consent of the parent or legal guardian who also signed this Agreement.
  - The University reserves the right to terminate this Agreement, and/or reassign the residential space for the failure to pay fees or for judicial sanctions (Judicial Termination) resulting from a violation of University or Residential Education and Services policy. Licensees whose agreements are terminated under these circumstances will be responsible for all contractual obligations and associated fees which will include all charges for the full 2010-2011 academic year. In addition, the licensee will be charged a \$250 License Agreement Cancellation Fee.
  - The University reserves the right to cancel this Agreement when a resident ceases to be enrolled as a full-time student.

- F. Mandatory Meal Plan:** All resident students are required to purchase a University meal plan. Freshman and athlete residents are required to purchase at least a 14 Meal Plan. All other resident students are required to purchase at least a 10 Meal Plan. Any student who lives in a residence hall and does not sign up for a meal plan will automatically be signed up for the minimum requirement and billed accordingly. For additional information regarding meal plan options and prices, please refer to the Meal Plan Contract.
- i. Request forms to reduce or eliminate the meal plan requirement are available in the Office of University Services. The deadline to appeal the meal plan requirement for the Fall 2010 semester is August 6<sup>th</sup>, 2010. The deadline to appeal the meal plan requirement for the Spring 2011 semester is January 11<sup>th</sup>, 2011. Additional information regarding the stipulations of these requests is available on the request form.
  - ii. Meal plan service for the fall semester begins with dinner on Tuesday, August 24, 2010 and ends with dinner on Friday, December 17, 2010. Meal plan service for the spring semester begins with breakfast on Tuesday, January 18, 2011 and ends with dinner on Thursday, May 12, 2011.
  - iii. Limited dining options may be available during official University breaks, if dining halls are open (including, but not limited to, Thanksgiving, Christmas, and Spring Break). Meal plans will not be active during these times. Flex dollars and/or cash will be accepted. Please check with Bon Appétit for specific information regarding dining options during University breaks.
  - iv. Student athletes are required to purchase a 14 meals a week plan or greater. Student athletes required to stay on-campus during University breaks (Thanksgiving, Christmas, and/or Spring break) will have active meal plans during the break.
- G. Payment of Housing and Meal Plan Fees:** The student shall pay all fees by the Bursar's office published due date. Failure to pay fees when due shall be considered a breach of this Agreement and may result in one or more of the following actions:
- ❖ Denial of housing and meal services
  - ❖ Loss of space
  - ❖ Inability to register for classes
  - ❖ Withholding of University records or diploma
  - ❖ Turning the matter over to collections
    - *When the University is forced to turn the account to collections, the student shall be responsible for all additional costs of collection including attorneys' fee and cost. In the event of court action to enforce this Agreement, the student shall be responsible for paying all court costs and fees, including attorneys' fee and cost.*
- H. Cancellation of Housing License Agreement:** Residents who have not paid within seven calendar days of the date of occupying their residence may be subject to a Cancellation of Housing License Agreement notice. A 72-hour's written Cancellation of Housing License Agreement notice will be delivered if the Bursar's Office determines they have not made satisfactory payment arrangements.

**II. Period of Residence\***

- A. Opening and Closing Schedule:** The University will furnish the student a housing assignment in a residence hall and will open and close the residence halls according to the following schedule. Please note that no early arrivals or late departures will be permitted except with the written permission of the Office of Residential Education and Services. Students who fail to abide by the following dates and times will be fined \$25 per hour or portion thereof.

Fall Semester	Spring Semester
<b>Residence Halls Open for New Students*</b> 8:00am, Sunday, August 22, 2010	<b>Residence Halls Open for Returning Students*</b> 8:00am, Monday, January 17, 2011
<b>Residence Halls Open for Returning Students*</b> 8:00am, Tuesday, August 24, 2010	<b>Residence Halls Open for New Students*</b> 8:00am, Tuesday, January 18, 2011
<b>Residence Halls Close for Thanksgiving Break</b> 7:00pm, Friday, November 19, 2010 Licensee are expected to vacate their on-campus housing assignment within 24 hours after the end of his/her last class period	<b>Residence Halls Close for Spring Break</b> 7:00pm, Friday, February 25, 2011 Licensee are expected to vacate their on-campus housing assignment within 24 hours after the end of his/her last class period
<b>Residence Halls Open after Thanksgiving Break*</b> 8:00am, Sunday, November 28, 2010	<b>Residence Halls Open after Spring Break*</b> 8:00am, Sunday, March 6, 2011
<b>Residence Halls Close for Christmas Break</b> 7:00pm, Friday, December 17, 2010 Licensee are expected to vacate their on-campus housing assignment within 24 hours after the end of his/her last final exam period	<b>Residence Halls Close for Summer Break (except graduating seniors)</b> 7:00pm Friday, May 13, 2011 Licensee are expected to vacate their on-campus housing assignment within 24 hours after the end of his/her last final exam period
* Dates and times are subject to change. Please refer to assignment letter and/or orientation pack for updated times and dates.	<b>Residence Halls Close for Summer Break- Graduating Seniors Only</b> 1:00pm, Sunday, May 15, 2011

- B. Christmas Housing:** Standard housing rates do not include Christmas Break. Students desiring on-campus housing during Christmas Break have to make individual arrangements with the Office of Residential Education and Services and pay associated costs (\$30 per day). A minimum stay may be required. Additional costs do not include meal plans. Students must turn in room keys before leaving for Christmas Break.

### III. University Responsibilities

- A. **Assignment:** Assignments are made at the University's discretion taking into account, whenever reasonable, information provided by the licensee. The University will endeavor to e-mail a notice of housing assignment to licensee's Eagles e-mail address prior to the beginning of each semester. The University reserves the right to reassign residents at any time, for any reason at its sole discretion. The University will endeavor to notify affected students of a reassignment in advance. Chi Rho and Chi Sigma residence halls have a maximum capacity of five residents and the Quad apartments have a maximum capacity of five residents.
- B. **Roommates:** Requests for specific roommate(s) will be considered if the request is mutual and both applications are submitted before June 1, 2010 (for Fall) and January 1, 2011 (for Spring).
- C. **Unit Consolidation:** The Office of Residential Education and Services reserves the right to reassign residents or consolidate units occupied at less than full capacity at any time. If a student occupying a super-single is assigned a roommate, the University will refund a prorated amount of super-single charges based on the date the new roommate moves into the unit.
- D. **Right of Entry:** University officials may enter residence halls for health and safety checks, facility repairs and checks, or for "reasonable cause" such as a medical emergency or a probable violation of University policies. Students are not to add personal locks or change locks to any doors within their assigned space.
- E. **Fines:** Fines may be assessed to the licensee at the discretion of the University. Please reference the 2010-2011 Student Handbook.

### IV. Student Responsibilities

- A. **Check-In:** Licensee is required to officially check-in with the Residential Education and Services Office prior to moving into their housing assignments. Residents are responsible for examining all furnishings, fixtures, appliances and must record the condition of their assigned space and its contents on a University-provided unit condition form within 48 hours of occupancy. Failure to do so subjects the licensee to financial responsibility for preexisting damage. Failure to check-in with the Office of Residential Education and Services will result in a \$25 fine per day until check-in is completed. Students will not be allowed to check into their housing assignments prior to their assigned move-in date without the permission of the Office of Residential Education and Services.
- B. **Late Arrival:** Licensee shall notify the Office of Residential Education and Services in writing prior to August 1, 2010 (for Fall) or January 1, 2011 (for Spring) if they intend to occupy their assigned space after their assigned check-in date. If this is not done, the space may be reassigned and the student will be placed in the next available room.
- C. **Check-out:** Licensee agrees to vacate the premises within 24 hours after the end of their last final exam period and no later than 7:00pm on Friday, May 13, 2011. The student shall remove all personal property, leave the unit in a clean and orderly condition to avoid cleaning fees, arrange furniture to its original position at move-in, and return his/her key to the Office of Residential Education and Services to avoid re-keying charges. Students vacating after 7:00pm on Friday, May 13, 2011 will be assessed a late charge of \$25 per hour or portion thereof.
  - i. Students whose Housing and License Agreements are cancelled, either through Licensee's request or University action, must vacate their housing assignment within 72 hours of being notified of such cancellation or other deadline specified by the University. Failure to abide by this requirement will result in financial charges of \$25 per hour, or portion thereof, and/or other consequences as specified by the University.
- D. **Occupancy:** Licensee shall not permit any other person to occupy their assigned space. Licensee shall observe all aspects of University guest policy and will not permit an individual to stay in assigned unit except as permitted. Licensee understands that failure to comply may result in administrative and/or judicial action.
- E. **Unit Changes:** In order to change housing assignments, students must submit a Change of Housing Assignment Request Form to the Office of Residential Education and Services. Once the form is submitted, the request must be approved by the Office of Residential Education and Services before the change can take place. Once housing assignments are distributed, students must wait until September 13, 2010 (for Fall) or February 7, 2011 (for Spring) to submit a Change of Housing Assignment Request Form. Change of Housing Assignment Request Forms will not be accepted after November 29, 2010 (for Fall) or April 25, 2011 (for Spring). Approval of Change of Housing Assignment Request Forms may be granted or withheld at the University's sole discretion. Students who move rooms without approval or do not follow University instructions may be fined up to \$300 for each and every unauthorized move.
  - i. Students are assigned to specific spaces within suites and units. Students wishing to change assignments within their suite/apartment must still submit a Change of Housing Assignment Request Form and it must be approved by the Office of Residential Education and Services. Failure to receive approval before changing assignments within their suite/apartment may result in a student being required to move back to assigned space and a fine of up to \$300.
- F. **Keys:** Residents will be required to pay for lock changes if keys are lost/stolen or if keys are not returned at hall closing or at check-out to the Office of Residential Education and Services (\$75). Keys are not to be loaned to others or duplicated.
  - i. Students who lock themselves out of their rooms can visit the Office of Residential Education and Services during posted business hours to check out a temporary key. Students who lock themselves out after normal business hours need to contact the Office of Campus Safety for assistance.
  - ii. Students who fail to pick up assigned keys after a room is rekeyed will be charged a \$5 per day fee beginning on the third business day after notification of room rekeying until assigned key is retrieved.
  - iii. Students must turn in room keys before leaving for Thanksgiving, Christmas, and Spring Break. Failure to do so may result in a \$50 fine.
- G. **Abandoned Personal Property:** Personal property left in the student's room after expiration, termination, or cancellation of this license agreement (or after checking into a new assignment) will be disposed of as seen fit by the University. The University is hereby relieved of any liability for personal property left on the premises (or in a previous housing assignment after checking into a new assignment). Students who leave personal property on University premises will be charged a \$150 disposal fee.
  - i. Personal property left in common areas (lounges, programming areas, etc) in the residence halls will be disposed of by the University at its discretion. Licensee is hereby advised to not leave any property in such areas for any amount of time. Students who are found responsible for leaving personal property in common areas may be charged disposal and/or service fees.
- H. **Eagles' E-Mail:** Licensee is responsible to check their Eagles' e-mail accounts on a regular basis. Eagles' e-mail accounts will be the primary means of communication between the Office of Residential Education and Services (including Judicial Affairs) and residential students. Students will be held responsible for all information sent to their Eagles' e-mail addresses.
- I. **Guest Behavior:** Licensee is responsible for ensuring that guests are informed about and abide by the rules of the University, residence hall regulations, and the terms outlined in this license agreement. The student will be held liable in those instances when their guests do not abide by such rules or regulations or for behavior which is detrimental to the welfare of the residents or the physical property of the residence halls.

- J. Room Arrangement:** The University has standard room arrangements. While Licensee is allowed to rearrange furniture within an assigned space, he/she must (1) not violate any University and/or housing policies in doing so and (2) must return all furniture to its original arrangement prior to vacating the assigned space.

## V. Liability

- A. University:** The University shall have no liability for the loss, theft, or destruction of or damage to the student's property kept in the residence halls or caused by any third party. The University assumes no liability and provides no insurance or financial protection for the student's personal property. The University assumes no liability for injuries, loss or damage, including death, due to student use of residence hall facilities, including, but not limited to, stairs, kitchens, recreational equipment, furniture, etc. The University shall not be held responsible or liable for the student's accommodation if an assigned space is rendered uninhabitable due to circumstances beyond the reasonable control of the University, including but not limited to "Acts of Nature", e.g. flood, earthquake, and unusual weather conditions. The University also reserves the right to make special room assignments to accommodate those conditions.
- B. Student:** Licensee shall be liable for any loss or damage caused to the rooms or furnishings provided by the University and shall pay any and all damage charges upon presentation (via licensee's Eagles' e-mail account) to the student of a statement of charges. Licensee will also be responsible to pay for all necessary cleaning of their housing assignment during and/or after occupancy which arise from licensee action(s). Licensee shares liability with roommates and/or suitemates for all loss, damages, and/or necessary cleaning in relationship to licensee's housing assignment and accepts that they may be charged for loss, damages, and/or necessary cleaning caused by roommates/suitemates when the University does not have adequate information to charge a particular individual and licensee agrees to pay such charges. Licensee shares financial liability with all other residents of the residence hall or complex of the condition for the residence hall or complex and its furnishings, if individual liability cannot be determined.

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## VI. Agreement

- A.** This is a legal binding license agreement for the full academic term of 2010-2011: The undersigned understands and agrees to the housing license agreement and acknowledges that, if enrolled at Concordia University Irvine and accepts a space in a University residence, the student shall be obligated to pay for the full-academic year, as well as adhere to all University policies. Cancelling the contract between semesters will result in a \$250 License Agreement Cancellation Fee in addition to all contractual obligations and associated fees. The undersigned understands and acknowledges that this license shall remain otherwise fully binding at all times unless the student is released in full or in part by an authorized representative of the University. The undersigned fully accepts responsibility for all terms and conditions of the housing license and all other applicable policies and procedures of the University. The undersigned certifies that the statements made on this application are truthful and the signature(s) hereon is/are valid. The undersigned hereby enters into, agrees to the terms of, and accepts full financial responsibility for any and all payments and other financial obligations to Concordia University Irvine by reason of this application and housing license.

Signature of applicant: \_\_\_\_\_

Date: \_\_\_\_\_

**If applicant is under 18 years of age, please provide parent/guardian signature.**

I, \_\_\_\_\_, as parent or legal guardian of the above named student acknowledge and understand that by signing this application I become party to this Agreement and accept full responsibility for all the terms hereof and am subject to all of the terms and conditions of this application and housing license. I have read the terms and conditions of the housing license. I understand this Agreement is binding for the full 2010-2011 academic year.

Signature of parent/guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

### Licensee Checklist

Make sure that you have completed all the steps listed below:

- Fill out all sections of application.
- Acknowledge you have read and understand the terms of the agreement by signing the License Agreement.
- Include Meal Plan Contract form.
- Make a copy of this Agreement for personal reference.  
Returning Students: Pay Room Reservation Advance Payment in the Bursar's Office

**Return All Forms (including all pages of the Housing Application & License Agreement and the Meal Plan Contract) to the Office of Residential Education & Services or Mail the Forms to:**

Residential Education and Services  
Concordia University Irvine  
1530 Concordia West  
Irvine, CA 92612



**AFFIDAVIT OF FINANCIAL SUPPORT**

To obtain an I-20, the applicant must submit documentation ensuring their ability to manage the education related expenses of the applicant and handle the living expenses of any dependents. Concordia's International Student Advisor can give the applicant the dollar amount necessary to prove accountability based on the applicant's personal situation.

**To be completed by the applicant:**

Applicant's name \_\_\_\_\_ Date of birth \_\_\_\_\_

Please complete the following if your spouse or children will accompany you to the United States in F-2 status while you are enrolled at Concordia University. Additional support will be required for each dependent.

Family name	First name	Date of birth (mm/dd/yy)	Country of birth	Country of citizenship	Relationship to applicant	Gender
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F

**To be completed by the responsible financial party:**

The responsible party is:

Applicant  Parent  Other \_\_\_\_\_

This is to certify that I assume financial responsibility for the education related expenses of the above named applicant and dependents during their attendance at Concordia University. I have reviewed the International Student Budget from Concordia and am able to cover the expenses.

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

E-mail \_\_\_\_\_

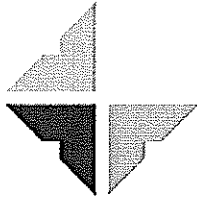
Signature \_\_\_\_\_ Date \_\_\_\_\_

**This form must be accompanied by the responsible financial party's current bank statement, a letter from the sponsor's bank, the completed Certificate of Bank Balance on the back of this form or other appropriate financial statement.**

**Office Use Only:**

I have reviewed the financial documents submitted to me for certification of responsibility and find them to be satisfactory to meet the needs of the education related expenses for this applicant and his or her dependents.

Signature of DSO \_\_\_\_\_ Date \_\_\_\_\_



**CONCORDIA**  
UNIVERSITY  
wise • honorable • cultivated

**CERTIFICATE OF BANK BALANCE**

Applicant's Name: \_\_\_\_\_

Name of Bank: \_\_\_\_\_

Address: \_\_\_\_\_

Depositor: \_\_\_\_\_

**PLEASE USE U.S. DOLLAR, USING CURRENT EXCHANGE RATE.**

KIND OF ACCOUNT	ACCOUNT NUMBER	BALANCE (U.S. \$)
(    ) Ordinary Deposit		U.S. \$
(    ) Fixed Deposit		U.S. \$
(    ) Current Deposit		U.S. \$
OTHERS:		

THIS IS TO CERTIFY THAT THE ABOVE BALANCE OF YOUR ACCOUNT WITH THIS BANK IS CURRENT AND CORRECT IN EVERY RESPECT.

\_\_\_\_\_  
*Manager*

\_\_\_\_\_  
*Seal of Bank*

\_\_\_\_\_  
*Date*

*When individuals (other than student) and/or organizations are providing funds, separate letters must be attached to this "Certificate of Bank Balance" form. These letters must guarantee specific amounts of support for your studies in the United States.*



# Undergraduate Health Form

**CONCORDIA**  
UNIVERSITY

The Wellness Center is a limited service provider.

It is strongly advised that any student with a chronic physical or psychiatric condition establish with a local health care provider prior to starting school.

## Part 1: To be filled out by student

Name: \_\_\_\_\_ Sex: M / F Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
*Last First Middle Initial*

Student cell phone: \_\_\_\_\_ Student E-mail: \_\_\_\_\_ Banner ID: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street City State Zip*

Person to notify in case of emergency: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street City State Zip*

Phone: \_\_\_\_\_ Alternate phone: \_\_\_\_\_

### PERSONAL HISTORY

- Allergies: \_\_\_\_\_
- Major injuries/surgeries: \_\_\_\_\_
- Other medical, emotional, or psychiatric concern: \_\_\_\_\_
- Medications (current): \_\_\_\_\_

### MEDICAL AND SURGICAL AUTHORIZATION

In case of illness and/or injury, authority and consent is given to the university for examination and treatment of the named student either at the Concordia University Health Center or by outside physicians and medical facilities as are available. Consent is further given for admission to a hospital for necessary medical or surgical treatments as ordered by a physician. It is agreed that all medical and/or hospital expenses incurred beyond those covered by an applicable student insurance policy will be paid directly and promptly by the undersigned student and parents or guardians and the university will not be held responsible.

Student signature \_\_\_\_\_ Date: \_\_\_\_\_  
*if under 18, parent/guardian signature*

## Part 2: To be filled out by healthcare provider

### Physical Examination

Are there any abnormalities upon examination? Yes No  
Comments: \_\_\_\_\_

Do you have any recommendation regarding the care of this student? Yes No  
Comments: \_\_\_\_\_

Is the student now under treatment for any medical condition? Yes No  
Comments: \_\_\_\_\_

### Required Immunizations and Tuberculin Test

MMR (Measles, Mumps, Rubella) – 2 doses required

- given on or after first birthday
- given at least 30 days after the first dose

Dose #1 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Dose #2 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

TETANUS-DIPHTHERIA (Td)

- Date of Td booster within the last 10 years

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

MENINGITIS

TUBERCULIN TEST (PPD-Mantoux) completed within the last 6 months

- Date given: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Date Read: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Result: \_\_\_\_\_ mm induration Negative / Positive

*If positive, please obtain chest x-ray and send copy of report.*

\*\*\* If student is unimmunized due to religious, personal, or medical reasons, please notify us.

Health care provider's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(not valid without office stamp)



**INTERNATIONAL STUDENT EXCHANGE COURSE REQUEST FORM**

**STUDENT INFORMATION**

**Name of Student:**

\_\_\_\_\_  
Surname/Last                      Given/First

**Sending Institution:**

\_\_\_\_\_  
Country

**PLEASE LIST BELOW THE COURSES YOU PLAN TO TAKE AT CONCORDIA UNIVERSITY, IRVINE:**

**Courses: Fall Term**

\_\_\_\_\_  
CRN      Course Number      Course Title                      Credits      Day/Time

\_\_\_\_\_  
CRN      Course Number      Course Title                      Credits      Day/Time

\_\_\_\_\_  
CRN      Course Number      Course Title                      Credits      Day/Time

\_\_\_\_\_  
CRN      Course Number      Course Title                      Credits      Day/Time

\_\_\_\_\_  
CRN      Course Number      Course Title                      Credits      Day/Time

\_\_\_\_\_  
CRN      Course Number      Course Title                      Credits      Day/Time

**Courses: Spring Term**

\_\_\_\_\_  
CRN      Course Number      Course Title                      Credits      Day/Time

\_\_\_\_\_  
CRN      Course Number      Course Title                      Credits      Day/Time

\_\_\_\_\_  
CRN      Course Number      Course Title                      Credits      Day/Time

\_\_\_\_\_  
CRN      Course Number      Course Title                      Credits      Day/Time

\_\_\_\_\_  
CRN      Course Number      Course Title                      Credits      Day/Time

\_\_\_\_\_  
CRN      Course Number      Course Title                      Credits      Day/Time