

NORTH DAKOTA STATE UNIVERSITY
LICENSE AGREEMENT FOR SUMMER RESIDENCE

MAY 17, 2021 – AUGUST 7, 2021

Department of Residence Life, West Bison Court, NDSU Dept. 3430, PO Box 6050, Fargo, ND 58108-6050

Last Name _____ First _____ Middle _____

Sex: Male Female Transgender* Age _____ Date of Birth ____/____/____ Student ID # _____
(if known)

Home Address Street _____ City _____ State _____ Zip _____

Email Address _____ Cell Phone (____) _____

Purpose of Stay: _____

Indicate dates for which residence is desired: Date in: _____ Date out: _____
(Calendar printed on back of this sheet)

Summer Rates: MLLC: \$37.75 per person, per night (7 night min stay);
\$28.25 per person, per night for stays longer than 31 days.
(Non-NDSU sponsored guests are subject to a 10.5% sales tax.)
Niskanen Hall: Price is subject to conference/camp/participant specific rates and needs.

Room preference: 4-bedroom apartment (with roommates) Single Studio (limited number available)

Residence Life will determine the assignment of room type. Your preference cannot be guaranteed. Both room types include a private bedroom. The room rate is the same regardless of which type of room you are assigned.

Roommate(s) preference (if applicable): _____

Accommodations – If you require accommodations due to a documented disability, contact the Disability Services Office, Library Suite 17, Dept. 2860, P.O. Box 6050, Fargo, ND 58108-6050 or phone (701) 231-8463 in addition to submitting this License Agreement and room reservation fee. Requests for accommodations cannot be assured for students applying less than 30 days prior to the beginning of the term for which on-campus accommodations are needed.

*Students identifying as transgender will be contacted by a designated staff member from the Department of Residence Life who will help guide the student through the options for on campus living arrangements. Staff will not ask for more information than is required and will work with the student to find the best suitable arrangement. All disclosed information will be kept confidential.

I hereby apply for accommodations as indicated above. I have read and agree to abide by the **GENERAL CONDITIONS OF THIS LICENSE AGREEMENT**, including the final rate schedule, and have **included my \$100 reservation fee or already live on campus.**

Signed _____ Date ____/____/____
Guest _____

Non-Discrimination Policy:
North Dakota State University does not discriminate on the basis of age, color, disability, gender expression/identity, genetic information, marital status, national origin, public assistance status, race, religion, sex, sexual orientation or status as a U.S. veteran. Direct inquiries to the Vice President for Equity, Diversity, and Global Outreach, 102 Putnam Hall, (701) 231-7708.

For University Use Only

Waiting List: Student Number _____ Receipt # _____ Fee \$ _____ Date ____/____/____

MAY 2021

Sun	Mon	Tues	Wed	Thu	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	29	20	21	22
23	24	25	26	27	28	29
30	31					

JUNE 2021

Sun	Mon	Tues	Wed	Thu	Fri	Sat
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

JULY 2021

Sun	Mon	Tues	Wed	Thu	Fri	Sat
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

AUGUST 2021

Sun	Mon	Tues	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				