

Applying to live in Residence at the Mount is easy!

Just follow the steps below to complete your residence application.

UNIVERSITY FINANCIAL POLICIES – Prior to submitting this application, please read the MSVU Financial Policies regarding residence living (i.e., residence and meal plan fees, withdrawal, etc.). By applying, you agree to abide by these and all other terms and conditions of residence living.

ROOM DEPOSIT –You will need to contact Financial Services at 902-457-6277 to set up an MSVU account. You will need to identify yourself to Financial Services, as an NSCC or NSCAD student and they will provide you with a Mount Student ID number, which you will need to pay deposits. In order to process your application, you must first pay a \$300 non-refundable deposit. Upon receipt of your application and deposit, and within 48 business hours, we will send you an email confirming your room assignment. In that email, we will request the remaining \$200 to complete the full deposit payment of \$500 that is required to secure your room. This second deposit is due within two weeks from the day we send your room assignment email. If we do not receive your full deposit within the two weeks, your spot will be released.

All rooms are assigned on a first-come, first-serve basis.

For traditional residence space, the full \$500 deposit will be allocated to your student account. For apartment-style space, the \$500 deposit is held as a damage deposit until the end of your lease term. Pending the completion of your room inspection sheet; i.e., cleanliness, furniture and damage, your deposit (partial or full) will be refunded.

ROOM AND MEAL PLAN CHANGES – An administration fee of \$150 will be charged for all room changes after your lease has been signed and confirmed by the Residence Life Office. After you sign your lease, should you wish to change your meal plan only, you will be charged a \$50 administrative fee.

WITHDRAWAL/CANCELLATION PRIOR TO MOVE-IN DAY – Please note, if you wish to withdraw/cancel once you have been assigned a room, you must let the Residence Life Office know in writing. Phone cancellations will not be accepted. If you let the Residence Life Office know, in writing by May 31, 2020 you will receive a partial deposit refund of \$200. No refunds will be issued after May 31st, 2020.



NSCC/NSCAD – MSVU Residence Life Application

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Pers	onal	l Info	rma	tion

Full Name:				
	Last	First		
Address:	Street Address		Apartment/Unit #	
	City	Province	Postal Code	
Home Phone:	Cel	I Phone:		
Email				
Date of Birth:	Gender:			
	Session App	ication		
Which session are	you applying for residence? *Check box that applies			
	Fall & Winter Term – Sept 2020 – April 2021			
	Winter Term ONLY – Jan 2021 – April 2022			
	Next of Kin Info	ormation		
Full Name:				
ruii name.	Last	First		
Relationship:				
*Next of Kin Addres Address:	ss ONLY if different then above			
	Street Address		Apartment/Unit #	
	City	Province	Postal Code	
Primary Phone:	Email Address:			
Permission to send	l information to/contact next of kin: *Please note, on occasion we may sen	d information to your next of kin		
	□ Yes – I give permission			
	No – I do not give permission			

Program Name

NSCC/ NSCAD Program Information

Year of Program

Program End Date

NOTE: When residence closes in April, you will be required to move to Birch 5 at a cost of \$30 per night.

Room Reference

First Choice

Second Choice

□ I understand that every effort will be made to accommodate my requests. In some cases this may not be able to happen, in that case, I will be assigned what is available. Priority for Westwood will be given to upper year, transfer, mature and international students over the age of 19.

Meal Plan

Meal Plan Preference

Special Dietary Requirements:

Please identify other special dietary requirements :

Allergies:

Please identify other Allergies

Have you lived in residence before?

I wish to be placed on a quiet floor

I wish to live in an all-female area

I prefer a single room

Do you smoke?

Roommate(s) requested (if you have chosen to live in an apartment style residence)

I request not to live with the following people (if you have chosen to live in an apartment style residence)

Release of Roommate information

Do you object to others smoking?

Other

Medical Information

Medical Conditions

Other Medical Condition

In case of an emergency – contact (if different from next of kin)

Emergency contact number

In case of an emergency - Alternate Contact

Alternate Contact Phone Number

RESIDENCE LIFE OFFICE USE ONLY

□ \$300 deposit received

\$200 deposit received