



**APPLICATION FORM
HALLS OF RESIDENCE**

Application N° -----

Date: -----

Personal Information

1. Surname ----- Other names-----
2. Establishment -----Department -----
3. Registration Number ----- Level -----
4. Date and Place of Birth -----
5. School last attended -----
6. Photocopy of school fees receipt (s) -----
7. Major Sports/Games of interest -----
8. Have you any physical disability? -----
9. Drugs prescribed in case of emergency-----
10. Sub-division of origin -----Division of origin-----
11. Region of origin-----
12. Nearest contact address in case of emergency-----
13. Students' Phone N°-----
14. Parents' Phone N°. -----
15. Meal combination -----

Group	Description	First Semester 119 days (Amount)		Second Semester 117 days (Amount)	
		Days	Amount	Days	Amount
A	Breakfast	250	29,750	250	29,250
B	Dinner	500	59,500	500	58,500
C	Breakfast and Dinner	750	89,250	750	87,750

⚠ The cost of accommodation is 15,000F per month and students shall pay a caution fee of 15,000F.

Undertaking

I declare on my honour that the information given above is to the best of my knowledge correct. I promise that if allocated a room, I shall abide by the rules and regulations governing stay in the Halls of Residence and pay for any damages caused during my stay in the room.

Signature of Student: ----- Date: -----

**OFFICIAL USE ONLY
Decision of Commission**

Date Received -----Accommodation-----

Assigned-----Rejected-----

NB: Applicants should attach the following documents to their forms:

- Photocopy of the registration fees
- A passport size photograph.