

K-State Wesley

United Methodist Campus Ministry at Kansas State University

Application for Residency

Residency Dates Applying for: _____ Today's Date: ___ / ___ / ___

Academic Year: _____ Fall & Spring Semesters Fall Semester only Spring Semester only

Applicant Name: _____
Last *First* *Middle*

Educational Status: (*FR, SO, JR, SR, etc.*) _____ Date of Birth: ___ / ___ / ___ Gender: M / F

Applicant's Mailing Address: Street _____
 City _____ State _____ Zip _____
 Home Phone: () _____ Cell Phone: () _____
 Email: _____

Name of Parent(s) or Guardian(s): _____
 Street _____
 Address and Phone: _____
 (*if different from above*) City _____ State _____ Zip _____
 Phone () _____ Email _____

Emergency Contact: Name _____ Relation: _____
 Phone (home): () _____ (work): () _____

Church Relationship (*United Methodist, Catholic, etc.*): _____
 Name of Home Church: _____
 Street _____
 City _____ State _____ Zip _____
 Church Phone: () _____ Pastor: _____

Do you plan on having a car? Y / N License Plate & make, model, color: _____

Will you be having a University meal plan? Y/N

Is there a person (or people) with whom you would like to share a room?
 Name(s): _____

By signing below I hereby affirm that the information I have provided is accurate. This is only an application and does not guarantee or reserve a space. I understand that providing false information will result in the cancellation of my application.

Applicant Signature: _____

For Official Use Only:

Sent application on _____	Sent waiting list notification on _____	Sent contract on _____	
Contract accepted on _____	Pre-payment made on _____	Recorded by _____	

Application for Residency - Part II

Please answer the following questions completely and honestly. Your responses will be kept confidential. We are not looking for a right or wrong answer – we are seeking to know and understand you, your true desire to live with us, and your desire to know and serve Jesus Christ.

Please answer these questions in your own words. Typewritten responses are preferred.

1. Share with us your relationship with God. If you were to view your relationship with God as a journey, where are you in that journey? (I haven't begun, well down the path, off the main road, etc.)
2. What is your understanding of a "Christian community"?
3. What do you expect to gain by living at K-State Wesley?
4. What do you expect to contribute to this community by living here?
5. Is there anything else you would like to/need to share? (about your faith, about your family, about any special needs you have, etc.)

References:

Please list two people (outside of your own family) who we can contact about you being a part of the K-State Wesley Residential Community.

Reference #1:

Name: _____

Address: _____

Phone: _____

Relation: _____ How Long _____

Reference #2:

Name: _____

Address: _____

Phone: _____

Relation: _____ How Long _____

I have read this application completely. I have been honest and complete with the information that I have recorded on all parts of this application. I understand that providing false information on this application may result in my loss of privilege to live at K-State Wesley.

Signed: _____

Date: ___ / ___ / ___

Please return by mail, email, or hand delivery.

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