UNIVERSITY OF MASSACHUSETTS DARTMOUTH
HOUSING AND DINING SERVICES CONTRACT
2016 – 2017 ACADEMIC YEAR
NAVITAS PMP CONTRACT

OFFICE DATE STAMP HERE

Last Name _____ First Name _____ MI ____ M ____ F ____ No answer ____ Date of Birth mm/dd/yyyy ____/____/____

UMassD Student Number _____ Cell Phone # _____ UMassD E-mail Address _____

Home: Street Address _____ Home: City/State _____ Home: Zip _____ Home: Telephone _____

Emergency Contact: Name _____ Emergency Contact: Phone Number _____

Rank Room Type preferences from 1 (high) to 3 (low)

	Room Type	Residence Hall	*Rate
____	Double	Oak Glen/Pine Dale	$8,344
____	Triple	Oak Glen	$7,828
____	Single - 2 bd/1 bth	Woodlands	$9,433
____	Single - 2 bd/2 bth	Woodlands	$10,030
____	Single - 4 bd/2 bth	Woodlands	$9,203
____	Single - A	Cedar Dell	$8,659
____	Single - B thru F	Cedar Dell	$8,811

	Any Hall Memberships (incl. Woodlands/Dell)	Yr. Rate
____	Platinum Dining Membership	$4,520
____	Gold Dining Membership + $225 Corsair Cash	$4,346
____	Silver Dining Membership + $400 Corsair Cash	$4,346

	Woodlands/Cedar Dell Meal Plan	Yr. Rate
____	Bronze Dining Membership + $400 Corsair Cash	$2,720
____	$1250 Declining Balance (year)	$1,250
____	$1000 Declining Balance (year)	$1,000
____	$750 Declining Balance (year)	$750
____	$500 Declining Balance (year)	$500
____	No meal plan	N/A

*- Rates are proposed and will be approved by the Board of Trustees in late June.
** Students in Pine Dale or Oak Glen, are **required** to choose a Platinum, Gold, or Silver dining membership. Students in the Woodland Apartments or Cedar Dell may choose any listed plan.
*** - Different amounts of Corsair Cash are available – please contact UMassD Dining for more information

Housing Accommodations

____ I will need assistance in case of an emergency
____ I am requesting reasonable accommodations for a disability and will be submitting my paper work to the housing office by June 12, 2016. Please refer to the Housing website for more information.

Roommate Request

Roommate requests are due no later than June 12, 2016, and are contingent upon bed space availability

_____
_____
_____

NOTE: If you prefer or need campus housing during some or all academic break periods (Thanksgiving, Winter Intersession, Spring Break, Summer Intersession) and would like to extend this academic year contract, please sign this academic year contract and place a √ in the following box ☐ . We will contact you with more information about 10 and 12 month contract options.

To change your meal plan over the summer, students can email campusservices@umassd.edu with their ID number and plan change request. Plan changes after August 15 should go through the UMass Pass office. Plans can be changed through the first ten (10) business days of each semester, but can not be canceled after August 15.

I acknowledge that my signature on this document constitutes a binding contract for the entire academic year (both semesters) stated above in accordance with the Terms and Conditions of Occupancy which I have reviewed at: www.umassd.edu/housing

In consideration of an assignment in the University Residences, I agree to pay the contract rates specified and abide by the Terms and Conditions of Occupancy. I understand specific assignments are made based upon space availability, and I may not receive my first choice or preferred housing assignment.

Student Signature _____ Date _____

Parent Signature (for students under 18 years of age) _____ Date _____

Parent Street Address _____ Parent City/State _____ Parent Zip _____

FOR OFFICE USE ONLY BUILDING: APT/ROOM: BED SPACE: ENTERED ON: ENTERED BY: