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| **Iona College**  **Intern Housing Application Summer 2020** | Office of Conference Services  715 North Avenue  New Rochelle, NY 10801  Ph. 914.637.7790 Fax 914.637.7799 | |
| **PERSONAL DATA** |  |  |
| **Full Name:** Click here to enter text. | **Date of Birth** Click here to enter text. | **Sex** Click here to enter text. |
| **Permanent Address:** Click here to enter text. | **Phone Number:** Click here to enter text. | |
| **Email:** Click here to enter text. | | |
| **Current Address:** Click here to enter text. | **Emergency Contact:** Click here to enter text.  **Relationship:** Click here to enter text. **Phone Number:** Click here to enter text.  **Email:** Click here to enter text. | |
| **EDUCATION** |  |  |
| **Academic Year in College:** Click here to enter text.  **Other:** Click here to enter text. | **GPA:** Click here to enter text. | |
| **College/ University Where You Are Currently Enrolled:** Click here to enter text. | | |
| **SUMMER 2020 INTERNSHIP** |  |  |
| **Company:** Click here to enter text.  **Address:** Click here to enter text. | **Company Contact/Email:** Click here to enter text.  **Phone Number:** Click here to enter text.  **Dates of Internship:** Click here to enter text. | |
| **Will your Internship cover housing costs?** Click here to enter text. | | |
| **\*\*PLEASE ATTACH A LETTER/EMAIL VERYIFYING YOUR INTERNSHIP FROM YOUR EMPLOYER \*\*** | | |
| **Move-In Date:** Click here to enter text. **Move-Out Date:** Click here to enter text.  **\*Please note the earliest move-in date is May 24, 2020 and the latest move-out date is August 8, 2020**\* **Please provide any special housing accommodations you may need due to a disability.**  Click here to enter text.  **Will you have a car on campus?** Click here to enter text.  **If so, please enter the year, make and model** Click here to enter text.  \*Please note a parking pass will be provided at no additional cost\*  Application Fee: A non-refundable $75 application fee is due with the submission of this application. The fee must be paid via check written out to Iona College or via credit card. Your completed Intern Housing Application should be returned to the Office of Conference Services, 715 North Avenue, New Rochelle, NY 10801 or via email to [achen@iona.edu.](mailto:achen@iona.edu)  I authorize investigation of all statements in this and I understand that any misrepresentation or false statement may result in the rejection of my application. Additionally, I agree to follow all rules and regulations of Iona College and the Office of Residential Life.  **Signature**: Click here to enter text. **Date**: Click here to enter text. | | |

**Office Use Only:** Date Received: \_ Room Assignment: \_ Move In Date: Move Out Date: