【Form 1】 Residence application form

**SNU SangRok Student Dormitory Residence Application Form**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Photo  (3cm\*4cm) | Student ID number | |  | |
| Name | |  | |
| Date of birth | | *0000.00.00* | |
| Gender | | ☐ Male ☐ Female | |
| Expected move-in period | | *1st of every month,*  *Dormitory: semester-based,*  *Family housing: yearly-based* | |
| E-mail |  | | | |
| Contact info. |  | | | |
| Guardian address |  | | | |
| Guardian name |  | | | |
| Guardian contact info. |  | | | |
| Affiliation | *Affiliated institution* | | | |
| Position | *Graduate student, researcher etc* | | | |
| Advisory professor | *Name of advisory professor or head of the department* | | | |
| Residence type | Dormitory | Family housing | | |
| 2 students per 1 room | Unfurnished | | Furnished |
| Deposit 200,000 KRW | Deposit 500,000 KRW | | Deposit 500,000 KRW |
| Management fee  618,000 KRW/semester | Management fee 147,000 KRW/month | | Management fee 246,000 KRW/month |
|  | ☐ | ☐ | | ☐ |

I hereby apply for residency at SangRok Student Dormitory at the Graduate School of International Agricultural Technology, SNU.

Year / Month / Day

Applicant: (signature)

I hereby recommend the above applicant for the residency at SangRok Student Dormitory at the Graduate School of International Agricultural Technology, SNU.

Graduate school of Department, Advisory Professor (signature)

**To the Dean of the SangRok Student Dormitory, SNU**

**【Form 2】 Residency Pledge**

|  |
| --- |
| **Residency Pledge for SangRok Student Dormitory**  I hereby pledge that I will comply to the rules and regulations of the SNU Student Dormitory upon residency at the SangRok Student Dormitory of Graduate School of International Agricultural Technology, SNU.  1. I will fulfill my duties as a resident to protect and maintain dormitory facilities, with special attention to prevent fire, to save water and electric usage, cooling and heating load, and will not disturb public order within the dormitory.  2. I will not accommodate non-residents overnight, transfer rooms or conduct similar acts, arbitrary change of interior change of dormitory facilities, create noise or use dangerous articles.  3. I will fully cooperate with the dormitory management regulations such as non-smoking within the dormitory, sanitation management in rooms, or recycling. Disadvantages will be taken with full responsibility upon nonfulfillment.  4. I will make payments of personal costs and monthly utility fees specified in the regulation within the designated period.  5. Damage or loss of facilities made intentionally or negligently will be repaired at my expense.  6. I will move-out within a designated period upon occurrence of reasons for move-out or receiving move-out orders.  Year / Month / Day    Pledged by: (signature)  **To the Dean of the SangRok Student Dormitory, SNU** |

**【Form 4】 Move-out application**

**SNU SangRok Student Dormitory Move-out Application form**

|  |  |  |  |
| --- | --- | --- | --- |
| **Approval** | **Person-in charge** | **Manager** | **Dean** |
|  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Student ID number |  | | |
| Name |  | | |
| Date of birth |  | | |
| Gender | ☐ Male ☐ Female | | |
| E-mail |  | | |
| Contact information |  | | |
| Building & Room | Bldg. Rm. | | |
| Date of move-in |  | | |
| Reasons for move-out |  | | |
| Expected date of move-out |  | | |
| Payment confirmation of utility fees | *Confirmed by: (signature)*  *※Roommate, self-signature if none* | | |
| Refund application for deposit and management fee | Deposit | KRW | |
| Management fee | KRW | |
| Account information  ※Account registered with one’s own name | Bank | Account No. | Account holder name |
|  |  |  |

I hereby apply for move-out from the SangRok Student Dormitory of the Graduate School of International Agricultural Technology, SNU.

Year / Month / Day

Applicant: (signature)

**To the Dean of SangRok Student Dormitory, SNU**

**【Form 5】 Move-out checklist**

**SangRok Student Dormitory Facility Damage and Cleaning Status Checklist**

☐ Checked room: Bldg. Rm.

☐ Checklist

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **Items** | **Check results** | | **Remarks** |
| **Fine** | **Poor** |
| 1 | Is there any damage to the desk and bookshelf in the room? |  |  |  |
| 2 | Is there any damage to the bed and storage closets in the room? |  |  |  |
| 3 | Is there any damage to electronic devices, papered walls and floors in the room? |  |  |  |
| 4 | Is there any damage in the kitchen, dining table, and sofa within the housing? (family living room) |  |  |  |
| 5 | Is the overall cleaning status of the room in a good condition? |  |  |  |
| 6 | Is the overall cleaning status of the bathroom and balcony within the room in a good condition? |  |  |  |
| 7 | Is the overall cleaning status of the entrance and storage closet in the room in a good condition? |  |  |  |
| 8 | Is the overall cleaning status of the kitchen within the room in a good condition? (family living room) |  |  |  |
| 9 | Is the password for the room front door and storage closet initialized? |  |  |  |
| 10 | Is the refrigerator in the common kitchen and the room, and garbage disposal in a good condition? |  |  |  |

☐ Check results

- Inspection date: 20 . . .

- Other remarks:

- Moving-out resident: (signature)

- Inspector: (signature)

☐ Facility inspector

- Affiliation: Administration team of SangRok Student Dormitory

- Name: (signature)

Head of Administrations, SangRok Student Dormitory: (signature)