

RÉSIDENCE DU CÉGEP DE LA GASPÉSIE ET DES ÎLES

94, rue Jacques-Cartier Gaspé (Québec) G4X 2P6 Tél. : (418) 368-2749

Courriel: residence@cegepgim.ca
Site Web: www.cegepgim.ca

IMPORTANT ALL AREAS OF THE RESIDENCE ARE NOW **NON-SMOKING**!



RENTAL APPLICATION 2018-2019

Name :			Family name : _		
Address :					
					town
_	prov	ince	country	posi	tal code
Home phone :		Cell phone :			
Email :					
Date of birth :	: day / month / year		_ Sex: F□ M□		
Name of parent	or guardian:				
Student status :	Regula	ar studies □	Adult education]	
		Program : _			
I WOULD LIKE TO RENT A ROOM					
IN AN APARTMENT Room in a renovated apartment (Refer to pricing) YES □ NO □					
Room:	Single □	Double (single occ.) □ Double (d	double occ.)	
Apartment :	Mixed □	Girls only □	Воу	s only \square	
With the following people :					
IN A PAVILION Room :	Single □	Double (single occ.) □ Double (d	double occ.)	
Pavilion :	York (W) □	Darmouth (Y)	-		
FALL / WINTER SEMESTER : FALL SEMESTER : WINTER SEMESTER :		☐ August 16 th 2019☐ August 16 th to De☐ January 1 st to Ma	ecember 31st 2019	PLEASE NOTE : THI NOT BE TERMINATI SEMESTER (see I	ED DURING A
STUDENT'S SIGN	IATURE		PARENT, GUARDIAN'S SIGNATURE (students under 18)		

AN APPLICATION FEE OF 15\$ COVERS ADMINISTRATIVE COSTS AND IS NON-REFUNDABLE RETURN YOUR RENTAL APPLICATION (including the amount of 15 \$) to the above address