





## STRANMILLIS UNIVERSITY COLLEGE A College of Queen's University Belfast

Date as postmark

Dear Student

### Halls of Residence 2020/21 and payment options.

The Halls registration will take place as follows:

ALL QUB/Belfast Metropolitan College/University of Ulster/Incoming Erasmus/International

Monday 14<sup>th</sup> September 2020 9.30am-4.30pm Halls Reception, Refectory

St Mary's University College

Sunday 20<sup>th</sup> September 2020 2pm-4.30pm Halls Reception, Refectory

Year 1 Stranmillis University College

Sunday 20<sup>th</sup> September 2020 2pm-4.30pm Halls Reception, Refectory

Year 2, 3 & 4 Stranmillis University College

Tuesday 22nd September 2020 9.30am-11am Halls Reception, Refectory Building

Your £200 Halls Deposit, application form, car parking application and bank forms must be returned by: All 2<sup>nd</sup>/3<sup>rd</sup>/4<sup>th</sup> Year Hall students:

All deposits, bank forms must be submitted at this stage.

# First Year students from all Universities/Colleges and Incoming Erasmus/International Students: Before 3<sup>rd</sup> July 2020

All deposits, bank forms must be submitted at this stage.

Please note Halls deposit will not be deducted from your account until confirmation of acceptance of course.

#### Deposit Payment Method:

Cheque (Please make payable to "Stranmillis University College), Cash, Debit/Credit Card. For debit/credit card payment please contact Halls Office 028 90384251.

The deposit is part of the booking process and will be refunded to you at the end of the Residential Licence Agreement period e.g. July 2021.

#### **Documentation enclosed:**

Please forward the following information immediately by return to - Halls

Office Reception, Stranmillis University College, Belfast BT9 5DY

- Halls Application Form please complete and return
- Direct Debit Instruction notice please complete and return
- Halls Fees Consent Form please complete and return
- Payment Schedule
- Halls information card please complete and return. Please enclose 2 passport photographs (please write your name on the back of the photographs)
- Car Parking Application Form please complete and return.

Room keys will NOT be issued unless the application form, bank form, deposit is received and payment of halls fees as per enclosed Payment Schedule.

continued over...

Dates Catering is Available 2020/21 - Catering will be available every weekend during each Term.

	Michaelmas Term	Hilary Term	Trinity Term
Stranmillis/St Mary's Catered Standard & Ensuite	Sun 20.09.20 -Fri 18.12.20 (13 wks)	Mon 11.01.21 - Fri 26.03.21 (11 wks)	Mon 19.04.21 - Fri 04.06.21 (7 wks) =31wk
QUB/University of Ulster/ Belfast Metropolitan College Catered Standard & Ensuite	Mon 14.09.20 -Fri 18.12.20 (14 wks)	Mon 11.01.21 - Fri 26.03.21 (11 wks)	Mon 19.04.21 - Fri 04.06.21 (7wks) =32wk

#### Residential Licence Agreement

<u>1</u><sup>st</sup> <u>Year students studying at Stranmillis University College</u> – this will be issued on confirmation of acceptance on course and must be returned prior to check in September 2020.

**ALL other students** – The Residential Licence Agreement will be issued on receipt of all documents above.

#### Payment Options

- 1. Payment in full prior to check in. Payment can be made by cheque, cash or credit/debit card.
- 2 . Direct Debit: 3 instalments collected from your account: 30 October 2020, 29 January 2021 and 30 April 2021
  - (i) A copy of the Direct Debit instruction is enclosed and it should be completed by the person who is paying the fees and hence whose bank account is being charged. In this respect you should note that the Direct Debit facility is only available to persons who hold a UK sterling bank or building society account operating the Direct Debit Scheme N.B. not all Bank Accounts have Direct Debit facility e.g. Savings Accounts.
  - (ii) Agreeing to sign the Residential Licence Agreement means that the signatory is agreeing to occupy a bedroom in Halls for a 37/38 week period the full Academic Year. The payment of the Residential Licence Agreement, if using Direct Debit, is over the 37/38 weeks and not per term. A charge of £25 will be incurred if funds are not available in the designated account when Direct Debits are collected. Collection dates are as published in the attached Payment Schedule and as above.

Only when the Head of Hospitality, Accommodation and Conferencing Services receives a withdrawal form from the course being studied in the relevant Institution can a Residential Licence Agreement be terminated. If there is an agreement that the student's Residential Licence Agreement is terminated there will be a 4 week cancellation fee and the deposit will not be refunded.

If you have any queries regarding halls payment arrangements, please contact Finance Department on 028 9038 4339. Please ensure that all forms are completed and returned on time as failure to do so can delay the registration and enrolment purpose.

Room keys will not be issued unless the application form, bank forms, deposit is received and payment of halls fees as detailed above. Please bring Photographic ID (i.e Drivers Licence or Passport) when collecting room keys.

Residential Licence Agreement will be issued on confirmation of acceptance of course.

Yours faithfully

C. Neobitt

Mrs C Nesbitt

Head of Hospitality, Accommodation and Conferencing Services







A College of Queen's University Belfast

Halls Office Stranmillis University College **BELFAST** BT9 5DY

Tel: 028 90 384251



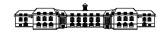
## HALLS APPLICATION FORM

APPLICATION FOR ACCOMMODATION - RESIDENTIAL YEAR 2020/21 TO BE ACCOMPANIED BY A £200 DEPOSIT PAYMENT PAYABLE BY CASH, CHEQUE OR DEBIT / CREDIT CARD AND ALL BANK FORMS

Personal Details						
UCAS / QUB Student Number	Returning students please provide your Student num students will be allocated a student number at Reg		Student Status  Please mark x at the appropriate box for the year you will be in September 2020.	QUB Year Other - Please State University of Ulster Year		
Title	Mr Miss Ms Mrs Male Fe	emale	Date of Bir			
Surname						
Forename(s)						
Home Address —		Present A (If different fr address)		Flat: Room:		
Postcode		Postcode				
Telephone (I	ncluding code)	Country				
Mobile		Email Add Your email a will be used contact you be shared w party.	address to & will not			
Details of your	study		Please mark x at the	appropriate box below		
Which College of Please mark the app	Jo you allend?	QUB U	U Belfast Met	St Mary's		
Course:		1				
Disabilities or m	nedical conditions		M			
Have you any should be cons	medical condition /recurrent illness w sidered when you will be living in Hall diabetic, hearing/sight difficulties, lim	s of Yes		ach details or, if you wish to discuss nfidence, contact the Halls Office 84251		
the Residential Fees & Paymen			Please select one of the	e following options below		
(Please make cheque	by Cheque prior to check in es payable to Stranmillis University College Belfast)					
All bank forms mus deducted from your	Halls Fees & Payment Schedule to be submitted with this application. No monies will account until October 2020.  To whom you wish fees to be discussed:	l be	Debt Collection Agend have a UK bank a	recover outstanding debt by using a cy and/or Legal Action. You must account that accepts direct debit ts cannot be collected from savings		

Your Accommodation					
If your application is persons whom you wo			ocated near a	anyone	? If so please state the names of two
1.	Pres	sent Hall:	Flat:	Roon	n:
2.	Pre	sent Hall:	Flat:	Roor	m:
					essed preference. The allocation of in this application form.
				ΙL	IFESTYLE CHOICE
Discount Management				P	lease tick the following if you wish to consider his lifestyle option.
Please mark ⊠ for you SINGLE STANDARD CAT	_	ommodation.			Quiet Living  No Alcohol
SINGLE ENSUITE CATER	ED Limited Avai	lability⊡		е	us there is Limited Availability we will make very effort to accommodate your choice. This will be on a first come first serve basis.
					LL ROOMS & BUILDINGS ARE NON SMOKING
RESIDENTIAL ACCOMMODA Students who are applying for the appropriate Residential Lice	a place in University				ble for the full Periods of Occupation as defined in
Completed forms and of 31st March 2020 EARLY 1st Year Students – 3rd	BIRD OFFER July 2020.				e by:  Licence or Passport) when collecting
Halls Keys					
Check List 🔀	If paying your init	tial payment by cheque,	put your name, l	JCAS OF	R QUB Student number on the back of the cheque
Application form		posit Booking Fee ake cheques payable to		versity C	ollege)
	Direct D	ebit Form			
Is your email address	Halls of	Residence Record	d Card		
correct?	2 Passp	ort sized Photogra	aphs	Please 6	ensure that your name is written on the back
	being offer understand	ed accommodation by th	ne University Col d to a refund of n	lege and ny depos	sit either in whole or in part in the event of my my subsequently declining the offer. I furthermore it either in whole or in part in the event of early to College Property.
information will be used in the University College, Belfast. I use	e administrative pronderstand that the re	ocess and procedures a esidential fees are payal	associated with one of the second sec	the provi	ppropriate fees and charges. I understand that this sion of an accommodation service by Stranmillis Occupation as defined in the appropriate section of of the Residential Licence Agreement.
I have read and agree to the te	rms and conditions a	as above. Please tick to	confirm.		
Signed					Please address this form to: Halls Office, Accommodation Application, Stranmillis University College Belfast,
Date	1 1				BELFAST BT9 5DY.
		Leading Innot	<sup>Yati</sup> ve Professiona	l Practic	e

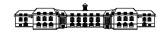
#### HALLS OF RESIDENCE RECORD CARD



STRANMILLIS UNIVERSITY COLLEGE

					A College of	Queen's University Belfast	
			ES (Block capitals please) me you are known by				
Office Use <b>20/20</b>	Office Use <b>20/20</b>	Office Use <b>20/20</b>	Office Use <b>20/20</b>			PLEASE ATTACH THE	
HALL	HALL	HALL	···	HALL	•••••	2 PASSPORT PHOTOGRAPHS	
FLAT	FLAT	FLAT	FLAT				
ROOM	ROOM	ROOM		ROOM			
HOME ADDRESS: (Block capitals please)			DAT	DATE OF BIRTH STUDENT NUMI (Issued at Registra		· · · · · ·	
POSTCODE: E-MAIL ADDRESS: MOBILE NO: TELEPHONE NO:			YEAR OF ENTRY TO HALLS  BEd/ BA /BSc /PGCE /QUB (Please circle as appropriate) OTHER Please state			circle as appropriate) R Please state	
NAME AND ADDRESS OF PARENT/GUARDIAN/NEXT OF KIN (Please state which)  MOBILE NO: TELEPHONE NO:			Have you any medical condition /recurrent illness which should be considered when you will be living in Halls of Residence, e.g. diabetic, hearing/sight difficulties, limited mobility, epilepsy etc			red when you will be living . diabetic, hearing/sight	
In the event of emergency ie: medical do you give consent for us to contact the above named contact YES / NO							
For Office Use Only				Any person will not be so		ation given, a third party	

#### HALLS OF RESIDENCE RECORD CARD



STRANMILLIS UNIVERSITY COLLEGE

					A College of	Queen's University Belfast	
			ES (Block capitals please) me you are known by				
Office Use <b>20/20</b>	Office Use <b>20/20</b>	Office Use <b>20/20</b>	Office Use <b>20/20</b>			PLEASE ATTACH THE	
HALL	HALL	HALL	···	HALL	•••••	2 PASSPORT PHOTOGRAPHS	
FLAT	FLAT	FLAT	FLAT				
ROOM	ROOM	ROOM		ROOM			
HOME ADDRESS: (Block capitals please)			DAT	DATE OF BIRTH STUDENT NUMI (Issued at Registra		· · · · · ·	
POSTCODE: E-MAIL ADDRESS: MOBILE NO: TELEPHONE NO:			YEAR OF ENTRY TO HALLS  BEd/ BA /BSc /PGCE /QUB (Please circle as appropriate) OTHER Please state			circle as appropriate) R Please state	
NAME AND ADDRESS OF PARENT/GUARDIAN/NEXT OF KIN (Please state which)  MOBILE NO: TELEPHONE NO:			Have you any medical condition /recurrent illness which should be considered when you will be living in Halls of Residence, e.g. diabetic, hearing/sight difficulties, limited mobility, epilepsy etc			red when you will be living . diabetic, hearing/sight	
In the event of emergency ie: medical do you give consent for us to contact the above named contact YES / NO							
For Office Use Only				Any person will not be so		ation given, a third party	



## **HALLS FEES CONSENT 2020-21**

Name of student (block	capitals)						
Student's home address	s (including postcode)						
Student's term time add	ress (including postcode)						
Contact telephone No's:	(Home)						
	(Mobile)						
Email Address							
Date of Birth							
Student Number: (Year 1 Student number at registration. Forms may be cowithout this number)							
	<u></u>	ı		l l	U		l.
	Name	1		Conta	ct Numb	per	
Please indicate with whom you wish fees to be discussed: e.g Student only, Spouse, Parents or Sponsor	Name			Conta	ct Numb	per	
whom you wish fees to be discussed: e.g Student only, Spouse,		vith Student on	V	Conta	ct Numb	per	
whom you wish fees to be discussed: e.g Student only, Spouse, Parents or Sponsor  The people noted above nee	Please discuss fees ved to be aware of the information Office or Finance Office	ition shared on	this docun				the Halls
whom you wish fees to be discussed: e.g Student only, Spouse, Parents or Sponsor  The people noted above need  Please tick how you intend	Please discuss fees ved to be aware of the information Office or Finance Office of Plant P	ition shared on ce to discuss H	this docun				the Halls
whom you wish fees to be discussed: e.g Student only, Spouse, Parents or Sponsor  The people noted above nee	Please discuss fees ved to be aware of the informa Office or Finance Offi	ition shared on ce to discuss H	this docun				the Halls
whom you wish fees to be discussed: e.g Student only, Spouse, Parents or Sponsor  The people noted above need Direct Debit Instalments In full, prior to check in	Please discuss fees ved to be aware of the information Office or Finance Office of Plant P	ntion shared on ce to discuss H	this docun	nent if the			the Halls
whom you wish fees to be discussed: e.g Student only, Spouse, Parents or Sponsor  The people noted above need Direct Debit Instalments In full, prior to check in	Please discuss fees very deal to be aware of the information Office or Finance Office of the pay your Halls Fees:	tion shared on ce to discuss H	this docun	nent if the			the Halls

Return to: Halls Office, Stranmillis University College, Stranmillis Road, Belfast, BT9 5DY assured accommodation

#### STRANMILLIS UNIVERSITY COLLEGE

A College of Queen's University Belfast

# APPLICATION FOR PARKING PERMIT HALLS OF RESIDENCE (Non Halls Students are NOT ELIGIBLE FOR Parking Permits)

# ACADEMIC YEAR 2020/21 THE COLLEGE CANNOT GUARANTEE A CAR PARKING SPACE

	Make:	Type:	Colour:
	Registration No:		(As per vehicle or Log Book)
2	Surname of Applicant:		
	Forename(s) in full:		
	Home Address:		
	Town:		
	County:		
	Postcode:		
	Number of Miles from Home	to Stranmillis University C	ollege:
3	Mobile Telephone No:	Hon	me No:
4	Address during term time:		
5	Course details: (Please indicate) Stra	anmillis University College	
6	DECLARATION: Name of registered owner of	the above vehicle:	
	Signature:	Da	ate:

We encourage students to park on campus, however, there is limited parking spaces which will be filled on a first come first served basis. Once the College Car Parks are full please park in alternative Public Car Parks.

Any person bringing a motor vehicle inside the College Grounds does so at his/her own risk and the College cannot accept any responsibility for damage, accident or theft. Please advise your Insurance Company of your Term Time Address.



#### STRANMILLIS UNIVERSITY COLLEGE

A College of Queen's University Belfast

www.stran.ac.uk

Please fill in the whole form using

a ball point pen and send it to:	Originato	1 a ruentinic	I
	9	6	4
Finance Office - Income section			
Stranmillis University College			
Stranmillis Road	This is not p	art of the instr	uction to your
Belfast			
BT9 5DY	Student	t Name:	
Name(s) of Account Holder(s)			
	Accoun	t Holder(:	s) Addres
Bank/Building Society account number			
Branch Sort Code	Accoun	t details (	Checked
	Instructio	n to your b	ank or Buil
		y Stranmillis etailed in thi	
Name and full postal address of your Bank or Building Society	Direct Det	bit Guarante	e.
To:The Manager Bank/Building Society			
Address	Signature	(s)	
		, -,	
Postcode			
r various			
	Date		
Reference Number (Student No.)			
S			



### Instruction to your **Bank or Building Society** to pay Halls fees by Direct Debit

9	0	+	٥	Ð	3					
						<u> </u>				
This is not part of the instruction to your Bank or Building society.										
Student Name:										
Account	t Holder(s	s) Addres	is:							
Account	t details (	Checked	Ву:							
Please pay account de	y Stranmillis	University ( s Instruction	ding Societ College Dire subject to the	ct Debits fro						
Signature(	s)									
Date										

#### The Direct Debit Guarantee





If there are any changes to the amount, date or frequency of your Direct Debit Stranmillis University College will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Stranmillis University College to collect a payment, confirmation of the amount and date will be given to you at the time of the request.

Banks and Building societies may not accept Direct Debit Instructions for some types of account

If an error is made in the payment of your Direct Debit by Stranmillis University College or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society

If you receive a refund you are not entitled to, you must pay it back when Stranmillis University College asks you to.

You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required by our bank. Please also notify Stranmillis University College