



WORLD AFFAIRS SEMINAR

*Dedicated to the advancement of international goodwill and
peace through a better understanding of global issues*



LODGING PREFERANCE FORM

(All Information Kept Strictly Confidential. May be Shared with Medical Staff)

Name: _____
Last Middle First

Mailing Address: _____

City/State: _____

What was your sex assignment at birth:

____ Female ____ Male ____ Intersex ____ N/A (prefer not to announce)

How do you describe your gender:

____ Man ____ Woman ____ Transgender Man ____ Transgender Woman
_____ (write in your preference) ____ N/A (prefer not to announce)

What is Your Lodging Preference:

- ____ Male Dormitory (share room with one other male)
- ____ Female Dormitory (share room with one other female)
- ____ Open Housing (inclusive, voluntary housing option under which WAS delegates are assigned a private room in a designated living unit with other students regardless of sex, gender identity or gender expression.)

Rules and Expectations

- There is very limited availability for Open Housing, therefore placement is not guaranteed to everyone who requests it.
- All housing areas will be supervised by WAS Staff members using the same standards which apply to both gender inclusive and gender specific housing units.
- There is no additional cost for Open Housing.
- Open Housing is not intended for romantic liaisons or cohabitation.
- All delegates are expected to contribute to the community by respecting others' motivation for choosing their housing option.
- All delegates agree to abide by WAS expectations and rules (signed as part of application).
- Any violation of this agreement by a delegate will result in immediate expulsion from WAS.
- No credits or refunds are given for expelled delegates.
- It is agreed that an expelled delegate will reimburse their sponsor the full amount of tuition and any other expenses incurred in their scholarship.

I wish to be assigned housing and agree to all stipulations as described in this form:

Signature of Delegate

Parent or Guardian Signature

Printed Name of Parent or Guardian