



Mailing Address:
2 Castries Drive, UWI Mona Campus, Kingston 7
Jamaica West Indies
Tel. # 876-665-1235-10,
Website: <http://www.138studentliving.com>

138 Student Living Application Form – 2026/2027 Academic Year
Form must be fully completed and submitted by email to: info@138studentliving.com

SECTION A- PERSONAL DETAILS

University:	University ID #:	Faculty:
First Name:	Middle Name:	Last Name:
Telephone #:	Email Address:	Gender:
Nationality:	TRN/SSN	Date of Birth: / / Day Month Year
Home Address:		

SECTION B (i)- UNIVERSITY & HALL INFORMATION

1.	Indicate your Hall Preference:	
2.	Have you previously resided in a 138SL Hall?	
	• Have you previously lived in any other Hall?	
	• If yes , to either, please state the name of the Hall	
3.	Please select floor preference:	or (Choice is subject to availability)
4.	Are you a new or returning student?	
5.	State your academic status/year:	Other: Year
	• Is this your final year?	
6.	Room Type Preference:	
7.	Do/Did you have any relatives residing with 138SL?	
	• If yes , Name of relative:	Relationship:

SECTION B (ii)- FINANCIAL INFORMATION

8.	Who will be responsible for the payment of the rental?	
9. Information on Sponsor or Relative: -		
Name:	Relationship:	
Home Address:		
Email Address:	Nationality:	
Mobile Phone #:	Home Phone #:	
10. Information on Relative or Personal Employment Status		
Employer:		
Address:		
Contact #	Email Address:	
# of years employed:	Contact person:	
(Letter from employer confirming employment and proof of income should be attached)		
If Self-Employed, please advise:		

11. SUMMARY OF MONTHLY INCOME AND EXPENDITURE			
(Information submitted to us will be held in strict confidence)			
NET DRAWINGS OR SALARY	\$	RENT	\$
INCOME FROM: REAL ESTATE	\$	BANK LOANS/CREDIT CARD/MTGE Etc. PAYMENT	\$
BONUS AND COMMISSIONS	\$	LIFE INSURANCE PREMIUMS	\$
DIVIDENDS	\$	UTILITIES	\$
OTHER SOURCES	\$	OTHER LIVING EXPENSES	\$
	\$		\$
TOTAL	\$	TOTAL	\$



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SECTION C – EMERGENCY CONTACT INFORMATION

EMERGENCY CONTACT INFORMATION (i):

Name:	_____	Relationship:	_____
Home Address:	_____		
Email Address:	_____	Nationality:	_____
Mobile Phone #:	_____	Home Phone #:	_____

EMERGENCY CONTACT INFORMATION (ii):

Name:	_____	Relationship:	_____
Home Address:	_____		
Email Address:	_____	Nationality:	_____
Mobile Phone #:	_____	Home Phone #:	_____

SECTION D- HEALTH INFORMATION

12. Kindly indicate if you have any health issues:

- | | | |
|-----------------------------------|--|--|
| ☐ Asthma | ☐ Allergies | ☐ Not Applicable (None) |
| ☐ Epilepsy | ☐ Physical Impediment | |
| ☐ Other_ | _____ | |

13. A copy of the following should be submitted along with the application form:

- ☐ A valid Government issued identification.
- ☐ Current School identification.
- ☐ Scholarship letter for current period (where applicable)
- ☐ Passport size photograph
- ☐ Letter from the sponsor or relative confirming their commitment to pay. If Relative/Self is selected, in section B, you are required to provide evidence of income for the last three months.

The undersigned hereby certifies that all information provided in this application and its supporting documents are true, complete, and correct to the best of their knowledge, and acknowledges that such information will be used by 138 Student Living to determine the undersigned's creditworthiness. Moreover, it is expressly agreed that any considerations to the undersigned are made by 138 Student Living in reliance on the information disclosed in this application and its supporting documents.

I understand and agree that:

1. Application to 138SL does not guarantee a room.
2. The University's and 138SL regulation on conduct and policies under which housing facilities are operated must be always observed during the period of residence.
3. It is my responsibility to update my contact information as soon as it changes.
4. If I fail to respond to any correspondence from 138SL by the stated deadline my application will be cancelled.

Persons who have been offered and accepted a place in 138SL will be guaranteed accommodation for 9 months (Irvine) or 51 weeks (George Alleyne Hall or Leslie Robinson Hall), provided that all terms and conditions of the Hall Agreement are adhered to.

Signature _____ Date _____