

**UNIVERSITY COOPERATIVE HOUSING ASSOCIATION (UCHA CO-OP)**

**APPLICATION FORM – 500 Landfair avenue, Los Angeles, CA 90024**

**Website: www.uchaonline.com Fax # 310 824 0112 Tel # 310 208 8242**

The UCHA co-op is a non-profit organization that offers low cost housing to Full-time students from UCLA and other colleges. What is unique about the co-op is that most of its day-to-day chores and activities are conducted by the student members (i.e. residents) themselves that live here. Members are responsible for the efficiency of the organization, which includes part-taking in decision making, problem solving and general operational activities. As such, we depend on the cooperative contribution and conduct of members and welcome those that appreciate this principle and are willing to contribute towards its successful operation. This application must be forwarded with a **\$35.00** (U.S.) application fee (**non-refundable**), proof of student/staff status (ID/I-20, admission letter, etc.), and valid State ID/Driver’s license/Passport copy.

A decision regarding your application will be made thereafter (approx. time: 2-4 weeks). Applicants **may not** at anytime assume that admission has been granted until in receipt of **official confirmation** from UCHA **in writing**. On receipt of an offer of admission a space may be **reserved** only thereafter, by payment of the **\$650.00 (non-refundable)** Reservation fee, which will be credited towards the 1<sup>st</sup> room & board payment. Applicants are requested **not to** send the **\$650.00** until invited to do so by UCHA, and may not consider a space reserved until confirmed by UCHA **in writing**. All other payments i.e. **\$200.00** membership fee (**non-refundable**), the **\$1,200.00 (refundable)** security deposit and any pro-rated room/board (see the reverse for details), will be accepted only at check-in

Housing is per quarter, and residents are responsible for the entire quarter’s room and board (i.e. Rent) fees regardless of the actual days spent at UCHA in a quarter. However, the quarter’s room and board responsibility is divided into three installments each payment due on the **first** day (of each month). At the Co-op, members compete for their choice of rooms based on **seniority**. As such, new members should expect to be in a Triple room (at least the first quarter of their residence at UCHA) until sufficient seniority is earned. All payments must be made by: Cash, Visa, Master card, Money order or Traveler’s checks (Please make all Money orders or Traveler’s checks payable to “UCHA.”). **We do not accept American Express, the Discover card, or personal checks.**

**EXPRESS FEE:** Applicants wishing to have an early response to their applications may request so by payment of a **\$20.00 (non-refundable)** express fee, along with the **\$35.00** application fee. (UCHA reserves the right to decline an Express fee request and such requests, will only be accepted from applicants moving in within four months of the date of submission of the application). On receipt of this request, UCHA will post or E-mail a response on the status of an application within **5** business days. We welcome and encourage you to visit the co-op and take part in an official tour; for four times call-**310 208 8242**. Thank you.

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Quarter applying for (Circle one): Fall \_\_\_\_\_, Winter \_\_\_\_\_, Spring \_\_\_\_\_, Summer \_\_\_\_\_.  
(The UCHA Co-op quarter and all check-in/out dates are based around the UCLA undergraduate calendar – Students applying, including those attending schools with different start/end dates, should be, and are assumed to be prepared to observe this schedule).

Mr. \_\_\_ Ms. \_\_, Other \_\_\_\_\_, Family (Last) Name \_\_\_\_\_ First Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Country/State of Birth \_\_\_\_\_ Citizenship \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State/Zip code \_\_\_\_\_  
E-mail (Please print clearly) \_\_\_\_\_ Phone \_\_\_\_\_ Cell \_\_\_\_\_ Fax \_\_\_\_\_

Social Security #: \_\_\_\_\_ Passport # \_\_\_\_\_ Driver’s License # \_\_\_\_\_.

When would you like to move in? Month \_\_\_\_\_ Year \_\_\_\_\_. Are you a Full-Time student? Yes \_\_\_ No \_\_\_.

**College you will attend while at the Co-op** (Circle one): *UCLA Undergraduate UCLA Graduate UCLA EAP  
UCLA Research UCLA Staff UCLA Visiting Scholar UCLA Extension SMC Other (specify)\_\_\_\_\_.*

Degree/Major/Certificate Program of study (Specify) \_\_\_\_\_ .Student ID#: \_\_\_\_\_.

(PLEASE NOTE, YOU NEED TO BE A FULL-TIME STUDENT EACH QUARTER OF RESIDENCE AT THE UCHA CO-OP.).

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PARENT’S NAME: MOTHER \_\_\_\_\_ FATHER \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State/Zip code \_\_\_\_\_

CONTACT PHONE: Home \_\_\_\_\_ Work \_\_\_\_\_

**Contractual Obligations:** All members are required to perform a chore obligation of four/five hours per week, bathroom cleaning obligation, and observe all rules, policies and other contractual obligations (see website for details).

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References: Please list the names of two previous landlords in whose apartments you have lived within the last 3 years.

Name	Phone	Month/Year till Month/year
1 _____	_____	_____ (Do not list relatives)
2 _____	_____	_____ (Do not list relatives)

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**EMERGENCY CONTACT**

Name(s) \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Street City State/Country Zip code

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_

**I hereby authorize UCHA to contact the person/s mentioned above in the event of an emergency, and disclose any information as deemed necessary by UCHA.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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How did you learn about UCHA? Bruin Ad \_\_\_\_\_, mailing \_\_\_\_\_, campus posting \_\_\_\_\_, friend \_\_\_\_\_, other \_\_\_\_\_,

What does *cooperative living* mean to you (explain): \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor? Yes\_\_ No\_\_ If yes, please give details: \_\_\_\_\_

Have you lived here before? Yes\_\_ No\_\_ If yes, when? From \_\_\_\_\_ till \_\_\_\_\_ Were you expelled/Evicted? \_\_\_\_\_

Have you applied to UCHA before (for housing)? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, when? \_\_\_\_\_

Have you been evicted by a previous landlord? Yes\_\_ No\_\_ If yes, Explain: \_\_\_\_\_

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I certify, with my signature below, that I understand all of the policies and conditions stated in this application, and that the information I have given (in this application) is correct and truthful. My signature also authorizes UCHA to verify my student status, credit history, and any or all information listed, and I am aware that I/or my family members will be contacted regarding and to recover any debts I may incur while at UCHA. I also understand that failure to disclose the truth will be grounds for immediate withdrawal of admission, and termination of my contract, and understand that the UCHA also reserves the right to make any changes, deny or withdraw any offer of admission, or cancel reservation, and for no cause.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian signature if applicant is under 18 \_\_\_\_\_ Date \_\_\_\_\_

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**Payment Authorization:** I authorize UCHA to debit my credit card: Visa/MasterCard # \_\_\_\_\_, for a total of US \$ \_\_\_\_\_ Expiry \_\_\_\_\_ Security code: \_\_\_\_\_ (last three digits), Zip code \_\_\_\_\_.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**NOTICE: ALL CHECK-INS MUST BE DONE IN PERSON AND MAY ONLY BE DURING OFFICIAL OFFICE HOURS (I.E. MON.-FRI. 10 AM-6 PM). HOURS VARY DURING THE HOLIDAY SEASONS. PLEASE EMAIL AT [UCHA.DIRECTOR@GMAIL.COM](mailto:UCHA.DIRECTOR@GMAIL.COM) TO CONFIRM TIMES. Also, please bring two forms of photo ID, one from the college you will be attending in Los Angeles. (An admission letter will also be adequate). Please note: This application is valid for only one Academic year (Fall through summer). If admission is not gained during this period, a new updated application will need to be filed. Additionally, if admission is not gained for the quarter applied, a formal request (by mail/ email) must be made for an application to be considered for another quarter.**

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**AT CHECK-IN, ROOM/BOARD (R&B) PAYMENTS WILL NEED TO BE MADE AS FOLLOWS:**

- For Check-ins during the 1st month of the UCHA quarter: R&B due-\$**650.00** (i.e. reservation fee).

- For Check-ins during the 2nd month of the UCHA quarter: R&B due will be for the remainder of the quarter on a pro-rated basis (with a minimum due of \$650.00). The \$650.00 reservation fee will count towards the Pro-rated R&B.

- For Check-ins during the 3rd month of the quarter: R&B due will be the Pro-rate for the remainder of the quarter, and the \$650.00 (Reservation fee), which will be applied towards the R & B requirement for the next quarter.

**ADDITIONALLY: ANY CHECK-INS (WITHIN TWO WEEKS) PRIOR TO THE OFFICIAL CHECK -IN DATE, WILL BE BILLED @ \$25.00 A DAY, UNTIL THE OFFICIAL UCHA CHECK-IN DATE. ANY CHECK-INS AFTER ZERO WEEK AND THE FIRST WEEK OF THE (UCLA UNDERGRADUATE) QUARTER, WILL BE BILLED ON A (WEEKLY) PRO-RATED BASIS THROUGH END OF QUARTER.**

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**FOR OFFICE USE ONLY:**

PAYMENT	AMOUNT	RECEIPT#	DATE:
Application fee =	\$35.00	_____	_____
Express fee =	\$20.00	_____	_____
Member fee =	\$200.00	_____	_____
Deposit =	\$1,200.00	_____	_____
Pro-Rate R&B =	\$	_____	_____
Daily charge (\$25/day) =		_____	_____
Reservation fee (1 <sup>st</sup> R&B) \$650.00		_____	_____

Approved/not approved: \_\_\_\_\_

Executive Director