



Marietta College

Washington State Community College Identification Verification for On-Campus Housing

Name _____ Social Security # _____

Street Address _____

City, State, Zip _____

Cell Phone # _____ WSCC Email _____

Previously attended Marietta College (circle one)? YES NO

If yes, other name(s) used: _____

Birth Date _____

Gender _____ Race or Ethnicity _____

Emergency Contact Name _____

Emergency Contact Phone _____

Note that all students, including WSCC students, residing on the Marietta College campus are required to pay for housing and a meal plan.

Signature _____ Date _____

Return this form via email to the Office of Community Living (ocl@marietta.edu)