



2025 HOUSING APPLICATION
STUDENT SERVICE AMERICA

Student Service America
1585 Kapiolani Blvd. Suite
1705, Honolulu, HI 96814
Phone: 808-542-9114
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1 Move In Date: ____/____/____ mm/ dd /yyyy	Move Out Date: ____/____/____ mm/ dd / yyyy	Agent Name: _____	For office use only: Application Received: ____/____/____ Program Start Date: ____/____/____
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2 Housing Options: (select the housing option) <input type="checkbox"/> Homestay Placement Fee \$350 (Non Refundable) Security Deposit \$200 (Refundable) *Homestay (Private, 2 meals/day) \$515 / 1 wk, \$1,030 / 2 wks, \$1,545 / 3 wks, \$2,060 / 4 wks *Under 17 yrs old or over 55 yrs old (\$590 / 1 wk, \$1,180 / 2 wks, \$1,770 / 3 wks, \$2,360 / 4 wks) *Includes Guardian Fee	<input type="checkbox"/> Condominium Residence (Moana House) Placement Fee \$200 (Non Refundable) Security Deposit \$300 (Refundable) **Private, No meals \$550 / week, \$2,200 / 4 weeks **Shared-2, No meals \$410 / week, \$1,640 / 4 weeks **Quad-4, No meals \$300 / week, \$1,200 / 4 weeks **Under 17 yrs old (\$605 / 1week, \$2,420 / 4 weeks) **Includes Maintenance fee & Laundry Fee
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Package Options: <input type="checkbox"/> Dance (Studio: _____) (_____ week (s) or Number of Lessons: _____) <input type="checkbox"/> Surf (Studio: _____) (_____ week (s) or Number of Lessons: _____) <input type="checkbox"/> Yoga (Studio: _____) (_____ week (s) or Number of Lessons: _____)
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3 Transportation Service:
 Airport Pick-up \$130 -All applicants must use our airport pickup service. Guaranteed pickup is 7AM to 8PM (flight arrival time) and/or accommodation check-in time is 7AM to 9PM.
 Airport Drop-off \$120 - Guaranteed pickup time (accommodation) is 7AM to 7PM. The accommodation check-out time is 12AM.
 *Any other times are not guaranteed, S.S.A. may pickup from 8PM to 11PM with a \$35 late pickup fee.

4 Student Information:
 Last Name (Family name): _____ First (Given) Name: _____ Nationality: _____
 Gender: Male Female Visa: F-1 Other Date of Birth: _____ (MM/DD/YYYY)

5 Personal Information: Smoker: <input type="checkbox"/> Yes <input type="checkbox"/> No Note: No homestay families allow smoking; you must smoke outside.	Allergies: Do you have any allergies? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list: _____
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6 Arrival Information:
 Arrival Date: _____ (MM/DD/YYYY) Arrival Time: _____ Airline: _____ Flight#: _____

7 Emergency Contact Information:
 Name: _____ Relationship: _____ Telephone: _____ E-mail: _____

8 Preferences for students choosing a Homestay Family (We will do our best to meet your preferences; however, we cannot guarantee that we will meet all of them. For best results, please submit this application at least 30 days before you plan to move in.)
 I prefer a family with children: Yes No
 Most important for me (Please choose one):
 Time to talk with the family
 Location. I want to be close to the school.
 Other: _____

9 Other:
 If you have any physical or mental conditions, you may list them here so that we can accommodate your needs. Please note: by listing any information here, you agree that we may share this information with third parties as we see fit. _____

 If you have any other requests or would like to provide any other information, please do so here: _____

10 By signing below, I hereby certify that the facts set forth above are complete and true to the best of my knowledge. **I agree that my application will not be processed until S.S.A. has received \$200(Non Refundable) from me for placement in a condominium residence or \$300(Non Refundable) for placement in a homestay. If a student rejects our airport pickup service, an additional \$30 will be charged.**
 I agree that I will forfeit the remaining balance of any rent payment (up to 30 days), if I cancel the housing tenancy less than 30 days before the occupancy date as listed above. I agree that a cancellation fee of \$130 will be charged if I cancel the airport pickup service or change my flight less than 72 hours before the scheduled arrival time. If I postpone my arrival date from the date listed above, I understand that I will be charged a new placement fee or a rental fee. I also understand that I need to pay a maintenance fee and a security deposit on my arrival. The maintenance fee is non-refundable. The security deposit is refundable after moving out, as long as there is no damage to the room and property. A Refund Request Form must be filled out. This application is for the periodic rental agreement, and the period of my stay is specified above. I agree to move out on the date above. I have the option to extend my stay only if there is availability. I understand that if I am enrolled with Central Pacific College and cancel my enrollment, my SSA accommodation will be terminated. Termination of accommodation will occur within the grace period. I understand that falsification of any information on this form will result in forfeiture of the placement fee without refund. I have read and agree to these terms.
 Print name: _____ Signature: _____ Date: _____