University of Hawai'i at Manoa Student Housing Services
Academic Year Conference Housing Application

Name of Group: <u><Guest's name></u>   Coordinator's Name: <u><Guest's name></u>
(Please Print or Type)

Mailing Address: <u><Guest's information></u>

City/State/Country/Zip Code: _____

Telephone: ( ) _____   Fax:( ) _____

Email: _____   Signature: _____

Please check the box(es) which apply to you:

■ Our conference group will be hosted by a University of Hawai'i department.

☐ Our conferees will be registered for a University of Hawai'i at Manoa credit or non-credit courses

during the conference period.

☐ Our conferees will be receiving credit from other universities or colleges.

☐ Our conference group belongs to a non-profit or charitable organization.

Brief description of program: Hawaiian Workshop on Parallel Algorithms and Data Structures

Sponsoring organization: Department of Information and Computer Sciences, UH Manoa

Name & title of University contact: Nodari Sitchinava, Assistant Professor

Total number of people in residence: _____ # of Males: _____ # of Females: _____

Number of people 18 and over: _____   Age 17 and below: _____

Check-in Date: _____   Check in time: 2:00 P.M.

Check-out Date: _____   Check out time: 12 noon

Accommodation preference: Please indicate the number of rooms required.

One bedroom (1 occupant) in four bedroom suite (shared bath for 4 people): _____ room(s)

One bedroom (2 occupants) in two bedroom suite (shared bath for 4 people): _____ room(s)

One bedroom, one occupant: _____ room(s)

Linen Option: (Please choose ONE option only)   ☐ Bed made upon arrival ($12.00 a bed)   ☐ Bed not made

Meal Program (Please circle):   *Meal Swipes can be used for any meal during the duration of your stay*

Monday - Friday Meal Plan: ☐ 2 swipe per day   ☐ 3 swipe per day

Saturday - Sunday/Holiday Meal Plan: ☐ 2 swipe per day

Meal Plan Special Requests: _____

Security deposit or other refund payable to: _____
(Please indicate full name and address) _____

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