

FOR OFFICIAL USE					
Application approved: YES NO Time Period					
Period A:					
Period B:					
Period C:					
Date://					

APPLICATION FORM FOR ACCOMMODATION 2025 - 2026

1. PERSONAL INFORMATION							
Family Name/Surname				Name			
Gender				Date of birth (DD/MM/YYYY)			
Address				Town/City			
Postcode				Country			
Telephone				Email			
Programme for which you have been accepted:							
SPECIAL EDUCATIONAL NEEDS AND DISABILITIES Please specify any learning difficulties, physical or other disability/medical condition which may require special arrangements or facilities by sending an email to the following address (keeaa@nup.ac.cy). Providing this information will not discriminate your application and details will be maintained confidentially by authorised university personnel.							
2. CONTACT DETAILS OF RELATIVE							
Family Name/Surname			Name	ame			
Email	Teleph	none Relatio		nship to Applicant			
3. PERIOD FOR WHICH ACCOMMODATION IS REQUESTED							
PERIOD A		PERIOD B			PERIOD C		
Academic year 2025/26 (02/10/2025 - 04/06/2026)		(02/02/2026 - 04/06/2	2026)		(06/06/2026 - 29/09/2026)		
4. ACCOMMODATION FEES							
Fees: - €3920 for Period A (02/10/2025 - 04/06/2026) A) The payment of the fall semester (02/10/2025 - 01/02/2026) amount of €1.960 should be paid no later than the 09/08/2025, the latest. B) The payment of the spring semester (02/02/2026 - 04/06/2026) amount of €1.960 should be paid no later than the 09/01/2026, the latest. C) With the total payment of the period A in advance, you receive a 5% discount. - €1960 for Period B (02/02/2026 - 04/06/2026) D) The payment of the spring semester (02/02/2026 - 04/06/2026) amount of €1.960 should be paid no later than the 09/01/2026, the latest.							

- €1960 for Period C (06/06/2026 - 29/09/2026)

E) The payment of the summer period with the amount of €1.960 should be paid no later than the 14/05/2026, the latest. Upon approval from the Campus Services Office and in order to secure your Accommodation you are required to provide the following within the

• Completed and signed 'Accommodation Agreement for the Neapolis University Student Residence'. To be sent electronically at the Campus Services Office (accommodation@nup.ac.cy)
• Provide proof of deposit for the amount of €490.00 which will be retained as a guarantee for the obligations of the Tenant based on the content

of the 'Accommodation Agreement for the Neapolis University Student Residence'. The aforementioned amount may be returned upon student's written notification of departure to the Campus Services Office and positive confirmation from the relevant office that the conditions and obligations mentioned in the said Agreement have been fully met.

5. ACCOMMODATION FACILITIES AND SERVICES

- Heating/ A/C
- Utilities (water & electricity)
- WiFi Internet access
- · Outdoor and indoor Athletic Facilities
- Swimming pool

- Maintenance services
- Once per week cleaning
- Launderette (coin operated)
- · 24 hours Reception
- · Safe deposit

6. DECLARATION OF PERSONAL DATA

- 1. I, the undersigned, hereby provide my consent to the processing of my personal information, which I have disclosed herein to Neapolis University Pafos (hereinafter the "University"), by the University for the purpose of:
 - i. providing me with accommodation for the aforesaid specified period of time, and/or
 - ii. communicating with me, either by post, telephone, email or any other way, regarding any information relating to the accommodation arrangements, including, but not limited to, changing of room and/or apartment and/or roommate, and/or
 - iii. notifying me in relation to any changes pertaining to such matters as rent, contractual obligations and other similar mat-
 - (hereinafter collectively referred to as the "Purpose").
- 2. I acknowledge that in the event that I, the undersigned, do not wish to be contacted further by the University, I may at any time inform the University in accordance with the available communication methods.
- 3. I hereby acknowledge that, within the context of the performance of the Purpose, I may be required to provide personal information either to the University (including, but not limited to, my medical history) which are classified as 'sensitive' for the purposes of European data protection law and for which there are additional restrictions on how organisation(s) may use and hold this information. The University hereby confirms that it will always communicate to you the purposes for which the University wishes to use your sensitive information when it is being collected, and, if necessary, obtain your consent at that time. In such cases, you will be able to withdraw your consent at any time.
- 4. For the avoidance of any doubt, the following apply:
 - i. Any information and data provided herein by the undersigned to the University and which will be used, either directly or indirectly, by the University for the performance of the Purpose (as the case may be), shall at all times be identified, clearly marked and recorded by the University as the personal data of the undersigned.
 - ii. All personal data acquired from the undersigned pursuant to this form shall be solely used by the University for the performance of the Purpose (as the case may be) and shall not be further processed or disclosed to any third party without the consent of the undersigned unless this is required and/or allowed pursuant to the provisions of the Regulation (EU) 2016/679 on the Protection of Personal Data and/or the provisions of the applicable local legislation in relation to the protection of personal data (as amended from time to time) and/or the provisions of any other applicable legislation.
 - iii. The undersigned has been notified of his/her rights in relation his/her data contained herein. The aforesaid rights are outlined analytically in the Privacy Notice of the University, a copy of which is available at www.nup.ac.cy . For the avoidance of any doubt the undersigned hereby confirms that the undersigned is fully aware of his/her rights in relation to his/her data contained herein.
- 5. I, the undersigned, am fully aware that the aforesaid data may also include personal data of a third person and I hereby confirm that I have obtained the consent of the aforesaid person and hence I am fully authorized to provide and/or disclose his/her personal data to the University via this application form.*

Signed	Date	
* in case there is an option "Roommate Preference"		

This form must be completed and returned to the campus service officer. Housing is provided according to Neapolis University Pafos housing policy.

Neapolis University Pafos Campus

2 Danais Avenue, 8042 Pafos, Cyprus, Phone: +357 26843300,

Web: www.nup.ac.cy