

# ROOM RESERVATION

REVISED SPRING 2007

This form must be fully completed and returned to the office of Student Housing by the date specified. Payment of reservation fee must be paid receipt attached in order for this application to be considered.

**TO:** ALL CAMPUS STUDENTS  
**FROM:** STUDENT HOUSING SUPERVISOR  
**DATE:**

Campus residents requesting residence hall accommodation for the Fall/Spring semester must submit a room reservation form with a receipt of the \$100.00 deposit.

Room Reservations received after the deadline date will be handled on a space available basis. Please note; Students are limited to eight (8) semesters in the Residence Halls. The office of Student Housing reserves the right to make residence hall or room changes for the benefit of all

RESIDENT NAME: \_\_\_\_\_ (Please Print)  
Last Middle First

DATE: \_\_\_ / \_\_\_ / \_\_\_ STUDENT NO: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

CAMPUS ADDRESS: \_\_\_\_\_  
Residence Hall Suite Room

CAMPUS MAIL BOX: \_\_\_\_\_ TEL: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

REQUEST A ROOM CHANGE:  YES  NO

ROOM CHANGE: \_\_\_\_\_  
Residence Hall Suite Room

ROOMMATE REQUEST: \_\_\_\_\_ MEAL PLAN: (A) (B)

**Office Use Only**  
RECEIPT NO: \_\_\_\_\_  
DATE RECEIVED: \_\_\_ / \_\_\_ / \_\_\_  
Room Assignment: \_\_\_\_\_  
\_\_\_\_\_  
Student Housing Representative

\_\_\_\_\_  
Resident Signature

