

Room Transfer Request

Today's Date _____ Requested Transfer Date _____

Name of Resident _____ Unit # _____ Student # _____

Reason for Transfer _____ Special Requests _____

If you are considering changing units due to a roommate problem that you are unable to resolve, you must first contact your RA before submitting this form.

Some points to consider:

- Please be aware that we will do our best to accommodate your requests, but we cannot guarantee your specific floor or roommate requests
- Transfer requests are permitted with approval from the Coordinator, HRL
- Transfers requests are processed in order of the date received, based on the availability. We will contact you if your request is successful.

Room Transfer fees are \$50.00, plus cleaning of your room. Room cleaning charges will vary depending on how dirty the room is left. If the room transfer request is cancelled after accepting the room transfer, you will be charged a \$50.00 administrative fee.

I have read, understood and accepted the preceding terms

_____ Signature _____ Date _____

Please return completed form to your Resident Assistant

RA Approval	Coordinator, HRL Approval
Date	Date
RA Initial	CHRL Initial
New Unit Assigned	New RA