



**RESIDENCE LIFE & HOUSING**  
**BUILDING/ROOM CHANGE REQUEST**

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_ Class: Fr / So / Jr / Sr  
Last First MI

Current Address: \_\_\_\_\_ Room Telephone #: \_\_\_\_\_ Mailbox: \_\_\_\_\_  
Room # Hall

Requested Roommate's Signature: \_\_\_\_\_  
(The University reserves the right to assign students without this signature)

1. If your keys are not returned, there will be a charge up to \$75.00 for **each** key replacement.
2. Unauthorized room changes and improper checkouts will result in a \$50 fine.
3. Your room **must** be left in a clean and orderly condition or you will be charged for cleaning.
4. Promptly contact your Resident Hall Director regarding this change.
5. I understand the above information regarding the room change procedure.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**BUILDING/ROOM CHANGE APPROVAL**

(Room change will be finalized when **all** signatures are received.)

1. New Residence Hall Director. **Signature** \_\_\_\_\_

Change Desired: \_\_\_\_\_ Double  D Suite  Triple  T Suite   
Room # Hall

**Today's Date** \_\_\_\_\_ **Date of Move** \_\_\_\_\_ **YOU MUST MOVE BY THIS DATE.**  
**Date & Time to confirm you will move to this space:** \_\_\_\_\_

2. You must present this form to the Office of Residence Life & Housing to verify the price difference associated with your room change.

**Signature** \_\_\_\_\_ **Today's Date** \_\_\_\_\_ **Price Change** \_\_\_\_\_  
**Student Initials** \_\_\_\_\_

3. Current Residence Hall Director.  
**Signature** \_\_\_\_\_ **Today's Date** \_\_\_\_\_

4. Students must make an appointment with your current RHD to inspect the room. **Any room damages will be assessed during this time.**

**Signature of RHD** \_\_\_\_\_ **Date** \_\_\_\_\_

5. Once you have obtained all the signatures required above, you must present your form to the Housing Coordinator located in the Office of Residence Life & Housing for final approval. In order to receive your new room key, you must comply with the procedures outlined above, as well as provide a completed copy of this form to your new RHD.

**PLEASE BE ADVISED THAT A FINE WILL BE ASSESSED TO YOUR ACCOUNT AND DISCIPLINARY ACTIONS WILL BE TAKEN AGAINST THOSE WHO EXCHANGE ROOM KEYS BETWEEN THEMSELVES AND/OR SIMPLY MAKE AN UNAUTHORIZED ROOM CHANGE.**  
**STOP!!! Have you obtained all of the required signatures above?**

**Housing Coordinator's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_