UNIVERSITY OF MARY WASHINGTON

Office of Residence Life

SUMMER ROOM CHANGE REQUEST FORM

In assigning students to rooms, the Office of Residence Life takes into consideration not only availability of space, but needs and preferences that students may share with us. While we make every effort to place students where they will have the best possible experience, sometimes circumstances cause students to feel that the assigned space will not meet their needs, for one reason or another.

Room changes ordinarily are not allowed until the third week of classes. However, if you believe your situation merits earlier consideration, please share it with us below. Please be as specific as possible in order to facilitate evaluation of your request.

The University of Mary Washington does not discriminate on the basis of race, color, religion, disability, national origin, political affiliation, marital status, sexual orientation, sex, or age.

Please print legibly.

Name: _____Banner ID#: _____ DOB: _____

Last Name First Name MI

CS FR TR (circle one) Assigned Bldg/Room for Fall _____ Gender_____

Home phone number: ( ) _____-_____ Cell phone number: ( ) _____-_____

Summer phone number: ( ) _____-_____ Summer Email Address: _____

Smoking preference (circle one) non-smoker non-smoker willing to live w/smoker smoker

Reason for request: _____

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Student's Signature_____ Date_____

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