Room Change Request Form
requests may only be made from the third week of the semester through the thirteenth week of the semester

Fall 2020 Note: In order to qualify for a room change, you must have a requested housing location with a confirmed roommate. Room changes that do not have a requested location or roommate may only be considered between the fall and spring semester. If you feel unsafe in your current living situation, please contact your Area Coordinator.

Name: _____________________________ Student ID #: __________________
Date: ________________ Contact Number (Cell Phone): __________________
Current Housing: __________________________ Room #: ___________
Requested Housing: __________________________ Room #: ___________

Students interested in changing rooms must do the following:
1. Meet with your RA to go over your roommate situation and have them sign this form.
2. After meeting with your RA, attach a document to this form answering the following questions:
   a. Why do you want to move?
   b. List three ways you tried to resolve your roommate situation.
   c. List three things you can do to make your new living situation successful.
   d. What have you communicated with your current RA and roommate?
3. Get your future roommate’s signature below.
4. Email your Area Coordinator with the questions from above and request a time to meet with them.
5. Meet with your Area Coordinator to go over the questions and get their signature below.
6. Turn this form into University Housing. Additional instructions will be emailed to you, your current RA, and your new RA.

No moves may occur until a student has received written approval from University Housing. Failure to follow these procedures or moving without approval will result in a $50 fine.

Current Roommates’ name(s): ____________________________________________________________
Future Roommate Name: ___________________________ Future Roommate signature: ___________________________
Current AC Name: ___________________________ Current AC signature: ___________________________
Current RA Name: ___________________________ Current RA signature: ___________________________

Please note that the above box must be completed in order to be accepted and approved by University Housing.

For Office Use Only:
□ Approved       □ Denied: Reason________________________________________________________
Signature: ___________________________________________ Date: ________________________