

**University of West Georgia
Housing and Residence Life**

ROOM CHANGE REQUEST FORM

By completing this form, you are simply **making a request** to the Department of Housing and Residence Life. Please initial all statements at the bottom of this form and sign appropriately. Students who change rooms without written permission will be charged an improper room change fee and be required to move back to their original assignment (see back).

(Please Print)

1. Applicant Information:

Name _____ Date _____
UWG ID#: _____ Current Room or Apt. _____
Current Hall/Room: _____ Gender: _____
Cell Phone: _____ Email: _____@my.westga.edu
Class: FR__ SP__ JR__ SR__ GR__

2. New Specific Assignment Requested:

To be completed if you know a specific room (number or person) or person that you would like to room with. Please list your top two preferences in the space provided below. Note specific floors or room if applicable or preferred.

1st Choice Room/Type: _____ 2nd Choice Room/Type: _____
I would like to live with the following person: _____ Their UWG ID#: _____
Reason for requesting change: _____

3. New Assignment Requested:

To be completed if interested in moving within your current or to another building. Please rank, in order, your preferences (1, 2, etc) beside each choice. Mark only the building in which you will accept a new assignment. Note specific floors or room requests in "Comments/Special Requests" section below.

_____ Arbor View Apartments (A)	_____ University Suites (1)	_____ Bowdon Hall
_____ Arbor View Apartments (B)	_____ University Suites (2)	_____ Downs Hall
_____ Arbor View Apartments (C)	_____ University Suites (3)	_____ Watson Hall
		_____ Strozier Complex
		_____ Tyus Hall

Please initial each statement indicating that you acknowledge and understand the guidelines below:

- _____ *Applicant Initials* 1. I understand that Housing and Residence Life seeks to provide housing for as many students as possible, and to maintain a residence hall environment, which is conducive to student development. **To effect these goals, the Housing and Residence Life reserves the right to assign persons to all vacant spaces, to make room changes, and to approve/refuse room changes.** Consistent with University policy, no room assignment will be made or changed on the basis of race, creed, color, or national origin.
- _____ *Applicant Initials* 2. A room change is officially approved when this form is completed and returned to the appropriate housing office, and the student changing rooms is emailed notification that they can obtain room change paperwork from our office/Residence Life Coordinator. Students who move without approval a \$50 fee will apply, face disciplinary action, and be relocated at the discretion of the Housing and Residence Life.
- _____ *Applicant Initials* 3. The actual moving involved in the room change must be completed within 24 hours after the Residence Life office has approved the change. If not completed within the 24 hours, the change approval may be rescinded or improper check-out charges applied.
- _____ *Applicant Initials* 4. **I understand that my room change is not approved at this time. If my room change request is approved, I will be emailed (via my UWG email account) and I will need to complete the room change paperwork.**

I authorize Housing and Residence Life to change my room assignment as requested on this form. I will accept the new assignment and any possible change in room charge. When my room change is approved, I will be notified via my UWG email account. Should I change my mind about moving, it is my responsibility to notify Housing and Residence Life immediately. Should my request be approved, I understand that I will be expected to follow the Room Change Instructions. I have read and will comply with all of the procedures on back of this form.

Signature

Date