Apartment Transfer/Room Change Request

Claremont Collegiate Apartments

Housing Services

Housing Services (HS) understands that at times a resident's placement into a unit may not be ideal; or that a resident's housing needs may change during their time in the housing community. In those, or similar, instances, HS offers the opportunity to request a transfer into a new living environment. Requests of this nature should be infrequent, as HS believes that compromise is a key component in any shared living community.

Last Name:	**First Name:**	**Student ID #:**
Current Apartment #:	**Requested Apartment #/Floor plan:**	
Reason for change:		
Email address:	**Class Status:** **Master's** **PHD** **(circle one)**	

Transfers are always subject to availability, and approval of such a request is at the discretion of the Housing Services Office. If approved, a resident understands the following:

1. A **$100.00 Transfer Fee** will be added to their account. _____ **(initial)**

2. Once keys to the new apartment are received, she/he will have 48 hours to complete the transfer into the new unit and return keys to the former unit. _____ **(initial)**

3. Additional charges may be applied to his/her student account resulting from needed cleaning for or damage to his/her former unit. _____**(initial)**

Resident Signature:	**Date:**

Office Use Only:

Transfer Approved: (circle one) **Y** **N**	Date:
New Assignment:	New Rent Amount:
Referred to Community Advisor: (circle one) **Y** **N**	
Date (new) keys Picked up:	Date (old) keys Returned:
Additional Comments:	

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