

Room Change Request Form

This form is for any student who has a current room assignment and who would like to request a room change.

Student Information - Please Print Clearly	Gender: Male <input type="radio"/> Female <input type="radio"/>
Name: _____	ID Number: G _____
Current On-Campus Assignment:	Mason E-Mail Address (we will notify you of your approval via e-mail at your Mason e-mail address):
Area: Presidents DUCC Chesapeake TAP YRC Park	_____ @gmu.edu
Building: _____ Room/Apt. #: _____	Phone Number: () - _____

Rank any of the following options that you would be willing to move to. Room changes are processed on a space available basis. While every effort will be made to assign you to one of your preferred room types, it is not guaranteed. Your room change may not be granted if your preferred spaces are not available.

Freshmen only	Upper Class students only		
<u>Presidents Park Area</u>	<u>TAP Area</u>	<u>Chesapeake Area</u>	<u>YRC Area</u>
_____ * Single	_____ 1 bedroom apt. Double	<u>Blue Ridge, Shenandoah, Piedmont & Tidewater:</u>	_____ LS 2 bedroom apt (2 person)
_____ * Double	_____ 2 bedroom apt. Double	_____ * 1 bedroom double (2 person)	_____ PH 2 bedroom apt (2 person)
_____ * Triple	_____ 3 bedroom apt. Double	_____ * 1 bedroom triple (3 person)	_____ PH 2 bedroom apt (4 person)
_____ * Quad	_____ Townhouse Double	_____ * 2 bedroom double suite (4 person)	_____ LS 4 bedroom apt (4 person)
 <u>DUCC Area</u>		_____ * 3 bedroom Double (4 person)	_____ PH 4 bedroom apt (4 person)
_____ * University Commons Single		_____ * 3 bedroom single (4 person)	_____ PH 3 bedroom apt (6 person)
_____ * University Commons Double		_____ * 4 bedroom single (4 person)	
_____ * University Commons Triple			
_____ * DO/CO suite single			
_____ * DO/CO suite double	*=meal plan required		

Roommate request information can be found next page of this form. →

Smoking Preference – Please note that all of our residence halls are non-smoking. Smokers are prohibited from smoking in their residence hall rooms at all times. Residents who violate this policy may be subject to disciplinary action.

I am a SMOKER.

I am a NON-SMOKER and I object to living with a smoker.

I am a NON-SMOKER and I DO NOT object to living with a smoker.

Accommodation Needs
Do you have a condition, medical or otherwise, that would affect your housing assignment?

No.

Yes. If yes, please attach a letter from the Office of Disability Services that indicates you are registered with that office and that outlines your housing need.

Office Use Only - Do Not Write Below This Line

New Housing Assignment				Student Notified?		Comments:
Building	Room	Bed ID #	Room Type	<input type="radio"/> Yes	<input type="radio"/> No	
<input type="radio"/> Assignment Made			Staff Initials:			

Roommate Preferences: Please fill out the information below. While we will do our best to accommodate your request, we cannot guarantee our ability to do so. Please remember that space is very limited.

Roommate One:

Name: _____

Signature: _____

ID Number: **G** _____

Current Assignment: _____

E-Mail Address: _____@gmu.edu

Roommate Two:

Name: _____

Signature: _____

ID Number: **G** _____

Current Assignment: _____

E-Mail Address: _____@gmu.edu

If you have requested to move with a roommate and there is not space available for both/all of you, are you willing to move into a new space without your requested roommate?

- YES
- NO

Is there a specific space you would like to move into? Building _____ Room _____

Why are you interested in moving to this space?

If the space you have requested is unavailable, do you still wish to move to another available space according to your preferences on the other side of this form?

- YES
- NO

You must obtain your CURRENT Resident Director's signature before you submit this form to the Office of Housing & Residence Life.

Resident Director Name (Print)

Resident Director Signature

Date

RD Notes:

Dining Services Information –

All on-campus residents, except residents of the Townhouses, Apartments, Liberty Square, Potomac Heights, Northern Neck and students with 90+ credits, are required to purchase a meal plan. There is a separate, additional charge for the meal plan. For more information, please contact the Meal Plan office at (703) 993-2870.

Signature: _____

Date: _____