



401 West 130<sup>th</sup> Street, New York, NY 10027  
Phone 917.507.0070 - Fax 917.507.0019

## ROOM CHANGE REQUEST FORM

*Please complete form and return to the Office of Housing and Residence Life (Towers Office)*

Resident Name (First and Last): \_\_\_\_\_

Room Number: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Bedroom Type Desired in order of preference (rank 1-4):

- 1BR (shared)\_\_\_\_\_
- 2BR (shared)\_\_\_\_\_
- 3BR (private bedroom)\_\_\_\_\_
- 4BR (private bedroom)\_\_\_\_\_

Why is a Room Change being requested? (Please Circle):

- Bedroom Type Upgrade
- Roommate Conflict
- Other (please specify): \_\_\_\_\_

Room Change Guidelines:

- Room changes are not permitted during the first 3 weeks after move-in.
- Residents are strongly encouraged to notify their roommate(s) of room change prior to moving.
- The Office of Housing and Residence Life has the final decision on the approval of a room change.
- Completing this form is NOT a guarantee of a new housing assignment.
- If you are given a new housing assignment, all procedures for checking out of your old housing assignment must be followed to avoid an improper check-out charge.
- The Office of Housing and Residence Life does not guarantee roommate or suitemate compatibility.
- All requests will be processed within 10 business days of receipt.
- There is a \$100 transfer fee in certified funds (money order or cashiers check).

**I understand that by signing this document my room assignment will be changed if approved by the Office of Housing and Residence Life. I acknowledge that upon approval I will be notified via e-mail of all deadlines I will need to meet in order to complete the room change process. I also acknowledge, that if I am approved, I will be charged a \$100.00 transfer fee which must be paid in certified funds at the time of my appointment to fill out the necessary paperwork with the Office of Housing and Residence Life. If I fail to meet any deadline set forth by the Office of Housing and Residence Life, then I understand I may forfeit my new housing assignment.**

\_\_\_\_\_  
Resident Signature

\_\_\_\_\_  
Date



All persons will be treated fairly and equally without regard to race, color, religion, sex, family status, disability, national origin, or source of income.

