



UNIVERSITY OF LETHBRIDGE
HOUSING SERVICES

ROOM CHANGE REQUEST

Student Name: _____ Student ID#: _____

Current Room Number: _____ Phone Number: _____

Current Room Type: _____ Requested Semester: _____

Room Type Requested: (Rank 3 Choices)

1. _____

2. _____

3. _____

Room / Suite Preference: _____ Roommate Preference: _____

Please accept this as my official request to be reassigned to a different room or suite. I understand my student account will be charged a **\$50.00 non-refundable fee once my room change has been approved.**

REASON FOR THIS REQUEST:

I have spoken with the following:

My Roommates My RA My VP RLEC MGMT TEAM

Do you want to reside in an alcohol-free environment? Yes No Doesn't Matter

Activity Level: Low (1) (2) (3) (4) (5) High

Gender: Male Female

Age: _____ Year of Studies: _____ Semesters in Residence: _____

Date: _____ Student Signature: _____

FOR OFFICE USE ONLY

Date Received: _____ Fee Paid: _____ Receipt #: _____ ROOM

CHANGE: APPROVED DECLINED PENDING

REASON: _____

RA ADVISED: Yes No Student Advised: Yes No

STUDENT RESPONSE: ACCEPTED DECLINED

Captured 50.00 in Banner
New Roommates Notified
New RA Notified
Old RA Notified
Check New Inspection IN (New Room)
Security Notified
List Serve Updated
Cash Office Notified -
(Rm Rate / Dining Plan Changes)
StarRez ('Reserved'-New Room)

Blakiston Intercom
New Keys Made
New Inspection Sheet
Linen (International Students Only)
Uncheck Insp Sheet in for Old Room
Communication Manager (Intercom - KH / PH Only)
Old Keys Returned
StarRez (Check-in-'In Room')
Notify OLD Roommates (Field Team Access)
Clean & Insp Sheet to Field Team

Staff Signature: _____

Date Completed: _____

RLEC USE ONLY: _____

Date Completed: _____