

SHIPPENSBURG UNIVERSITY
Shippensburg, Pennsylvania

REQUEST FOR A SINGLE ROOM

Please complete the upper portion of this form and submit it to the Shippensburg University Housing Office, Old Main 210 Shippensburg, PA 17257 or fax the form to (717) 477-4007. In the fall semester single rooms will not be offered until at least the second week of classes as the Housing Office strives to maximize university housing by opening at capacity each year.

(Student's Printed Name)	(Date)	
(Student's Signature)	65 _____ (Student ID #)	
(Present Hall)	(Room)	(SU email address)

- * I am requesting a single room for the Fall Semester / Spring Semester, _____
(circle one) (year)
- * I agree to pay the single room rate of one and one-half times the room rate.
- * I understand by signing this agreement I am responsible for these charges.
- * I have 48 hours from the receipt of the approval to cancel this request without any obligation of these charges.
- * I understand that the Director of Housing will move me to a vacancy on campus if I cancel my single room request.

10/2007

** Dean of Students Office Use Only **

Assigned Single - Hall and Room: _____

\$ _____
(Single Room cost) (Proration)

Approval: _____
(Director of Housing) (Date)

Students will not be directly billed for these charges. Students will receive a returned copy of this form when the request is approved. Upon approval, payments are payable to Shippensburg University and are to be forwarded to Shippensburg University Student Accounts Office, 100 Old Main, Shippensburg, PA 17257. Please indicate with payment your Student ID # and that you are paying for a single room charge.

cc: Student
Residence Director
Student Accounts Office