

Office of Housing & Residence Life

Person for Person Swap Form

Please read all policies regarding room swaps below before completing and submitting this form.

- Complete this form if you have already discussed/arranged to switch rooms with another resident and all criteria below are met.
- · One form should be used for each swap. All individuals involved, including affected roommates MUST sign this form to be considered.
- Residents should not swap rooms until receiving approval from Residence Life. Moving without approval will result in a denial of the swap and residents will be notified to return to their original assignments. Failure to do so may result in fines.
- Room swaps involving **singles** are NOT permitted.
- After submitting this form, you will be notified via e-mail if your room change has been approved OR denied and you can begin your move.

Resident A: wishes to swap rooms with			Resident B:			
Last Name	First Name	MI	Last Name	First Name	МІ	
Current Building/Room ar	nd Student ID Number		Current Building/Room	and Student ID Number		
NDMU E-mail			NDMU E-mail			
1,	, w	ish to swap roor				
Resident A Signature			Resident B Sign	Resident B Signature		
Current roommates: You	have your roommates sign the r signature below acknowledge vith (also listed above) will be y	s your understa	nding that your roommate li ate.	sted above wishes to switch roour	oms and that the	
Last Name	First Name	MI	Last Name	First Name	MI	
Current Building/Room and Student ID Number			Current Building/Room and Student ID Number			
Signature of Resident A's Current Roommate			Signature of Resident B's Current Roommate			
Graduate Residence Coo	///prdinator Date		Date Rec'd Denied – Reason Resident Confirmation	Residence Life Office of Date Approved:	Use Only	

Roster/Datatel updated?:_____