MONMOUTH COLLEGE
SUMMER HOUSING REQUEST FORM
by Student

Name: _____________________________________________  MC ID #: ___________________

Summer housing is available from **Saturday, May 19, 2018 to Friday, July 27, 2018**. Requests must be received at least
ONE WEEK prior to the requested start date for housing. **Housing is limited and on a first come, first served basis.**

Dates Requested: FROM: _____/______/______ TO: _____/______/______

**There are no single rooms available for summer housing. If a roommate is not requested, one will be assigned.**

Roommate Requested: ______________________________________________

Reason for on-campus housing: ____________________________________________

Cell Phone # ___________________________ Special Needs: ____________________________________________

Your MC student account from the previous school year must be paid in full to be eligible to begin summer housing. Rent
is **$90.00 per week** (or any part of a week). Payment of the first week of rent is required seven days prior to arrival.
Subsequent rent payments are to be paid one week in advance. Renters with past due summer housing accounts will be
given one week to pay their current balance. If payment is not made, you will no longer be eligible for summer housing
and you will be asked to vacate the room immediately.

The room key must be returned to Student Affairs by 4:00 p.m. on the last day of the agreement. If not returned by this
time, you will be charged a lost key fee of $78.00. The last day for all summer residents to remain in their temporary
summer room is July 27, 2018. After July 25, 2018, students will be allowed to move back into their rooms assigned for
the academic year 2018-19.

Students in summer housing may be moved during the course of their stay. Students are to follow the rules and
regulations in the Student Handbook which is located on the Monmouth College website.

Please email questions on summer housing to Student Affairs at
residencelife@monmouthcollege.edu.

Please return the completed form to the Office of Residence Life, Poling Hall

______________________________________________________________________________

Signature Date

Office use only

Date Key Picked up:____________________
Date Key Returned:____________________
Hall:________________________________
Room:______________________________
Waive Fee _______
Reason: ____________________________________________