

University of Hawaii at Manoa
STUDENT HOUSING SERVICES
 2569 Dole Street, Honolulu, HI 96822-2328

OPEN TRANSFER REQUEST FORM: SPRING 2018

FIRST NAME	LAST NAME	STUDENT ID#
CURRENT HALL/ROOM	UH EMAIL	PHONE #

IMPORTANT INFORMATION

1. Use care when indicating selections. Requests will be processed exactly as written, and if granted will be **FINAL**.
 - a. Room types must be available for the halls you select.
 - b. ONE hall selection per choice- eg. "Hale Aloha" is an invalid choice, "Mokihana" is a valid choice.
 - d. All student housing policies and conditions apply.
2. Participation in the meal plan program is **MANDATORY** for all residential halls and **OPTIONAL** for apartment residents.
3. Please check your Hawaii.edu email for the results of your transfer request.
4. If your transfer is accommodated, your student account will be updated. You will be responsible for paying any rent increase and meal plan charges resulting from your transfer request.

HALL	1 st _____	2 nd _____	3 rd _____
ROOM TYPE	___ Single Occupancy	___ Single Occupancy	___ Single Occupancy
	___ Double Occupancy	___ Double Occupancy	___ Double Occupancy
	___ Triple Occupancy (HK /HL)	___ Triple Occupancy (HK/HL)	___ Triple Occupancy (HK/HL)
	___ Double Occupancy w/bath (GH)	___ Double Occupancy w/bath (GH)	___ Double Occupancy w/bath (GH)
	___ 1-BR Apartment (DOUBLE)	___ 1-BR Apartment (DOUBLE)	___ 1-BR Apartment (DOUBLE)
	___ 2-BR Apartment (QUAD)	___ 2-BR Apartment (QUAD)	___ 2-BR Apartment (QUAD)
	___ MOD 2-BR Apartment (Grad only)	___ MOD 2-BR Apartment (Grad only)	___ MOD 2-BR Apartment (Grad only)
	___ 2-BR, 4 occupants (FH)	___ 2-BR, 4 occupants (FH)	___ 2-BR, 4 occupants (FH)
	___ 4-BR, 4 occupants (FH)	___ 4-BR, 4 occupants (FH)	___ 4-BR, 4 occupants (FH)
	___ 2-BR, 2 occupants (FH)	___ 2-BR, 2 occupants (FH)	___ 2-BR, 2 occupants (FH)
	___ 1-BR, 2 occupants (FH)	___ 1-BR, 2 occupants (FH)	___ 1-BR, 2 occupants (FH)

****Bldg & Room #** _____

****If your requested room is not available, will you accept a transfer to another room in that hall?**

1st ___ YES ___ NO 2nd ___ YES ___ NO 3rd ___ YES ___ NO

SIGNATURE: _____ DATE: _____

I acknowledge that I have read the information on the request form and agree to all the terms and conditions.

TRANSFER REQUEST FORMS MUST BE SUBMITTED TO THE STUDENT HOUSING OFFICE BY: **FRIDAY, FEBRUARY 2, 2018 BY 4:30PM (HST) NO LATE EXCEPTIONS WILL BE MADE**

 For Assignment Use Only:

<input type="radio"/> Transfer Approved	<input type="radio"/> Transfer Denied
Date Effective: _____	Date Denied: _____