

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

**OPEN TRANSFER REQUEST FORM: SPRING 2019**

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.

<b>HALL</b>	1 <sup>st</sup> _____	2 <sup>nd</sup> _____	3 <sup>rd</sup> _____
<b>ROOM TYPE</b>	____ 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?**

1<sup>st</sup> \_\_\_\_ YES \_\_\_\_ NO      2<sup>nd</sup> \_\_\_\_ YES \_\_\_\_ NO      3<sup>rd</sup> \_\_\_\_ 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 1, 2019 BY 4:30PM (HST) NO LATE EXCEPTIONS WILL BE MADE.**

For Assignment Use Only:

Transfer Approved       Transfer Denied  
 Date Effective: \_\_\_\_\_      Date Denied: \_\_\_\_\_