

If you are applying to any specialty housing, please attach a typed sheet with your responses to the questions below:

1. Please describe, specifically, why you are applying to live in this type of housing.
2. What do you perceive as the advantages and disadvantages of living in this type of housing?
How might you deal with the disadvantages?
3. What would you contribute to the residential community?
4. What do you hope to gain from this community?

My first choice is:

- To live in a single room (but I have listed friends below that I'd be willing to live with in case no singles remain)
- To live in a multiple room or apartment with my friends who already live in _____
- To live in a multiple room or apartment with my friends also returning to campus. We want to live in _____

Friends' information if applicable:

1. _____ Current housing assignment
2. _____ Current housing assignment
3. _____ Current housing assignment

* Please be advised that there are not always enough empty singles to accommodate all requests. If you are not able to indicate someone with a space in their room with whom you are willing to live, and we find that we must place you in a multiple, you will be randomly placed with someone. Your name will also be on a waitlist for a single room. If any of the students you have indicated are on-campus, please have them e-mail us so we know they are aware of your request and are also willing to have you join them in their multiple room.

For Students Studying Away during the Spring Semester Only:

Student Proxy Agreement for Housing Lottery

I hereby give permission to the individual listed below to select a house &/or room on my behalf. I understand that by giving him/her permission, (s)he is selecting a house &/or room for me. I accept that any lateness to or absence from the process is the responsibility of my proxy and may result in my being housed after the lottery is completed. I realize that the decision of my designated proxy is final and that once my house &/or room have been selected, room changes may be requested through the normal room change application process, only after the academic year begins and the room freeze is completed.

Proxy's Name _____ Proxy's Signature _____ Date: _____
PLEASE PRINT

I certify that I have read, understood, and accept all terms & conditions stated on this form.

SIGNATURE REQUIRED: _____

RETURN TO: The Office of Residential Education & Living, Connecticut College;
Box 5233, 270 Mohegan Avenue; New London, CT 06320. **FAX** (860) 439-2875

Any student who would like to live off-campus must obtain a request form from the Office Student Life – 218 Cro

PLEASE ATTACH ANY NOTES OR ADDITIONAL COMMENTS