

2009 Summer Housing Application

Return completed application to the Office of Residential Education and Living (Warnshuis) by
Wednesday, May 6th, 2009 by 5:00 p.m.
Applications WILL NOT be accepted after this time

Print Name: _____ ID Number: _____ Class Year _____

Current Room: _____ Phone Ext: _____ Box #: _____ Email: _____

Date I want to move on campus: _____ Date I want to leave campus: _____

I have read the application and information sheet and agree to the terms and conditions.

Signature of applicant

1. Complete the category/categories below that identify your reason(s) for requesting summer housing and obtain the appropriate signatures to verify this request.
2. Provide billing information by providing additional information on the back of this form and/or next page, and obtain appropriate signatures from department to be charged.

WHY ARE YOU STAYING?

- Academic Internship
- Office Worker
- Students Working with a Faculty Member (research/project)
- Reunion Worker
- KECK/ Howard Hughes Scholars
- Other _____

Department: _____ Number of work hours per week (minimum of 20 hours is required) _____

Supervisor: _____
Printed Name Title

Starting Work Date: _____ Ending Work Date: _____

- Student Enrolled in Connecticut College Summer Courses:

Please list the courses and sessions that you are enrolled in (a minimum of 2 courses are required to be eligible for summer housing):

Course: _____ Session: _____

Course: _____ Session: _____

Departmental Signature verifying Course Enrollment: _____
Signature

WHO IS PAYING?

- If you are paying for your stay, please fill out and sign below:

I, _____ understand I will be charged \$110.00 per week** (\$70 for meals and \$40 for room)
Signature

I will be staying on campus for (check):

_____ the entire summer session _____ (# of) weeks (dates) _____

****A very limited number of exceptions will be made for residents whose internships/research require them to be away from campus during MOST meal times or for residents who have a medical or dietary need that requires a kitchen. Residents with the most need will be housed in Abbey and will be billed for room only (\$40.00 per week).**

PLEASE NOTE: Summer residents not returning as students for fall 2009 will not be provided housing of any kind after August 14th.

If you are interested in being considered for Abbey, with a room plan only, please attach a brief description of why you require this type of housing.

- If a department is to be charged for your stay, please provide additional information below and obtain appropriate signatures before submitting to Student Life.

PLEASE NOTE: You will not be approved to stay on campus until this information is verified. Check the appropriate department(s) to be charged for your summer stay. (See *SAMPLE* below.)

SAMPLE

Sample Account # to be charged: 0000000-000000 for
_____ the entire summer session 3 (# of) weeks (provide the dates of) 5/26-6/15 for
X room & board (\$110 per week) ___meals only (\$70 per week) ___room only (\$40 per week)
Shelly Metivier/ Dir. Res. Life & Housing Shelly Metivier 4/23/07
Printed Name & Title of Departmental Supervisor Sample Signature Date

_____**ADMISSIONS**
_____**DEAN OF THE COLLEGE/Summer Research**
_____**ACADEMIC DEAN'S OFFICE**
_____**INFO SERVICES**
_____**LIBRARY**
_____**OFFICE OF STUDENT LIFE**
_____**OVCS**
_____**RESEARCH GRANT**
_____**OTHER (Please list)** _____

Account # to be charged: _____ for:

_____ the entire summer session **or** _____ (# of) weeks (provide the dates of) _____

_____ room & board (\$110/week) _____ meals only (\$70/week) _____ room only (\$40/ week)

Printed Name & Title of Departmental Supervisor

Signature

Date