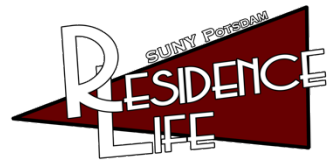


SINGLE ROOM APPLICATION

SUNY Potsdam Residence Life

Fall 2017 – Spring 2018



STUDENT INFORMATION

Name: _____

Student P#: P00_____

Cell Phone: _____ Email Address: _____@potsdam.edu

Class Year (Check One): First Year Sophomore Junior Senior Grad Student

Current Room Assignment: _____

Location of Desired Single Request: 1. _____
 2. _____
 3. _____

Roommate Check: ____/____/____ ____/____/____ ____/____/____ ____/____/____ ____/____/____ OFFICE USE ONLY

SINGLE RATES (cost per semester)

Standard Double - \$4,555 Suite w/o Bath - \$4,555 Suite w/Bath - \$4,715 Apartment - \$4,875

My signature below indicates that I have discussed my single with my parents/guardians and I agree to incur the charges for a single. In addition, by filling out and submitting this application, I understand that I do not have a right to decline my single should a space become available in my room.

 Signature

 Date

OFFICE USE ONLY:

Date Received: ____/____/____

Received By (print): _____

Date Offered: ____/____/____ Location: _____ Accepted: Yes No (Notes: _____)

Date Offered: ____/____/____ Location: _____ Accepted: Yes No (Notes: _____)

Date Offered: ____/____/____ Location: _____ Accepted: Yes No (Notes: _____)

Approval (After accepting specific location)

 Signature

 Date