

DORMS RESIDENTIAL FORM		
STUDENT/VISITOR:		
Name:		
Date of birth:	Major (if student):	Phone:
Reason for stay:		
ID (if student):	Visitor's Signature:	
Every night stay will cost 15\$	How long? <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	(4 nights are the maximum stay)
Check in:	Check out:	
HOSTING STUDENT:		
Name:		
Room number:	Class:	
Phone:	Host' signature:	
ID:	Major:	
APPROVAL OF ROOMMATE 1: <input type="radio"/> YES <input type="radio"/> NO		SIGNATURE:
APPROVAL OF ROOMMATE 2: <input type="radio"/> YES <input type="radio"/> NO		SIGNATURE:
RELATIONSHIP:		
Visitor's relationship to host:		
RULES AND REGULATIONS:		
<ul style="list-style-type: none"> This form must be submitted to the SAO 2 days prior the visit. The host is responsible for any action performed by the visitor. Any disciplinary actions performed by the visitor will cause suspension for both the visitor and the host from the dorms. All visitors are required to read the DORMS HANDBOOK found on the RHU website. 		
APPROVALS		
Dorm Attendant approval: if applicable <input type="radio"/> yes <input type="radio"/> no		Signature: _____ Date: _____
Student Affairs Office approval: if applicable <input type="radio"/> yes <input type="radio"/> no		Signature: _____ Date: _____
Finance Office approval: <input type="radio"/> yes <input type="radio"/> no		Signature: _____ Date: _____