

SUMMER HOUSING REQUEST FORM FOR RESEARCH STUDENTS

Gustavus Adolphus College

FOR OFFICE USE ONLY

Date: _____

Assignment: _____

APPLICATION DEADLINE: May 12, 2008

CHECK ONE—DATES REQUESTED FOR HOUSING

Option 1: All Summer (June 3 – August 30)

Includes housing in College View from June 3-August 12, housing in the Southwest Hostel from August 12-23, and housing as an early arrival in fall space from August 23-30.

Option 2: College View Only (June 3 – August 12)

Student accounts will be billed approximately July 1, Aug. 1 & Sept 1.

Option 3: Part of Summer (June 3 – August 30)

Charges for housing in College View are calculated by week and reported to student accounts approximately July 1, Aug. 1 & Sept. 1.

ARRIVAL DATE: _____

DEPARTURE DATE: _____

The student listed below will be performing research on campus and is eligible for summer housing. **The supervising faculty member must complete the information immediately below.** Students will be housed in College View Apartments (four students to an apartment). The summer housing rate is \$42.50 per week and billing begins June 3. Students will be billed each month for summer housing by Student Accounts and will need to pay for those charges. Students will be paid for the cost of their housing less taxes generated from the Provost's Office through the Payroll Director. A student must be employed at least half-time (20 hours per week) to qualify for summer campus housing. **Students may live in summer housing only for the time period they are performing research.** Students will be allowed to stay in their current room assignment until Tuesday, June 3 if their research position starts immediately after Commencement. Then students will be able to move into their assigned College View apartment starting the evening of June 3. Applicants for Summer Housing must be entering, current, or graduating Gustavus students.

TO BE COMPLETED BY SUPERVISOR, FACULTY, or INTERSHIP COORDINATOR – PLEASE PRINT INFORMATION

Department, Office or Program

Supervising Faculty Name

Signature, Supervising Faculty

Research Grant

Weeks Approved for Research

Signature, Academic Dean

Research Start Date

Research End Date

Weekly Hours Contracted for Research

Supervisors & faculty are responsible for contacting the Residential Life Office if the student's internship ends.

TO BE COMPLETED BY STUDENT – PLEASE PRINT ALL INFORMATION

Name ID# Gustavus E-Mail address Summer/Mobile Phone #

Current Hall & Room Assignment

2008-2009 Hall & Room Assignment

REQUESTED ROOMMATES: _____
Requested roommates must be mutual. Roommate requests for groups not housed for the same time period will be honored on a space available basis.

I verify that I have read and understand the information and expectations contained in this document and in the Summer Housing information provided by Residential Life. Further, I agree to abide by the "Terms and Conditions of Residence" in the **Housing Contract and Handbook**, the provisions in the **Code of Student Conduct**, other College policies published in the **Gustavus Guide** and elsewhere (available on the Gustavus website).

SIGNATURE: _____ **DATE:** _____

Please return this completed request to the Residential Life Office by May 12, 2008.