



Room Change Request Form
Graceland University Residence Life

Resident Name: _____

Date: _____

Resident Contact Information Write legibly in print or you may not be contacted.

Student ID # _____ Campus Box # _____

Phone Number: (_____) _____

Graceland Email Address: _____

Current Building: _____ **Current Room #** _____

Desired Building: _____ **Desired Room #** _____

Reason for Room Request

Fill out the reason for your room change request completely and honestly. Incomplete answers may result in a denied room change.

Requested New Roommate: Name: _____

Staff Approval Decision and Records Room Change Start Date: _____ Completion Date: _____

Check your e-mail for official approval or denial of your room change. Approved room changes must be completed.

Approved: The room change to Building _____ Room # _____ was approved.

Denied: The room change to Building _____ Room # _____ was denied.

New Inventory Completed? _____ Room Code Changed? _____

Residence Life Office notified to update database and floor plans: _____