



MCKENDREE
UNIVERSITY

Office of Residence Life

701 College Road • Lebanon Illinois 62254 • Phone: (618)-537-6855

For Office Use	
Date Received:	_____
Received By:	_____
Approved:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Room Change Request Form

Name of Student Requesting Move: _____
Last
Middle
First

Current Class Standing: Fr So Jr Sr

Student ID Number: _____ Cell Phone Number: (____) _____ - _____

Current Building: _____ Current Room Assignment: _____

Desired Building: _____ Desired Room Assignment: _____

Please Briefly State Your Reason For Requesting a Move:

Old RD Signature: _____ Keys Returned: ____ / ____ / ____

New RD Signature: _____ Keys Received: ____ / ____ / ____

New Roommate: _____

New Roommate: _____

New Roommate: _____

New Roommate: _____

New Roommate: _____

Student Moving: _____

It is the responsibility of the student to complete this form and return it to the Office of Residence Life in Clark Hall, Room 109. Completing this form constitutes a request for a move and is not a guarantee of room change nor an indication of the timeframe for the move. McKendree University retains the right to assign and reassign available spaces as needed by Residence Life.