



Housing Accommodations Request Form

Name: _____ Student ID# _____ Date _____

I am a _____ new student _____ current matriculated student _____ returning from LOA _____ other
_____ freshman _____ sophomore _____ junior _____ senior _____ transfer student _____ graduate student

Home Address _____

Cell Phone # _____ Email: _____

I am currently living _____ on campus _____ off campus

Current On Campus Housing Assignment: Hall: _____ Room Number: _____

Duration of Request: Single Term / Long Term for the _____ semester, _____ academic year

Disability for which housing and/or meal plan accommodation is being requested:

Specific accommodation request:

Reason you are asking for this accommodation:

- I am registered with Disability Services and documentation of my disability has been provided.
- I will provide documentation to _____ and register with Disability Services for accommodations.
- I am currently living in Lesley housing that was assigned to accommodate the above condition.

Student Signature: _____ Date: _____

Committee Decision: ___ Approved ___ Conditionally Approved ___ Lottery ___ Denied

 ___ Other: _____

- Letter Sent
- Date: _____