This form is 2 pages long. Please read the ENTIRE form. Both sides need to be completed in order for your application to be complete. Your signature is required.

- If you require an immediate transfer, please indicate this on this form and provide as much information as possible.
- If you do not require an immediate transfer, please provide a preferred transfer date.
- A non-refundable $50 Transfer Request Fee must be submitted with the Transfer Request Form.
- Emergency transfer requests are prioritized and all others will be considered in the order of request receipt date.
- Please ensure you fill out your Reason for Transfer.
- Residence Services staff will contact you within 10 business days of receiving your request with a status update.
- If Residence Services staff are unable to accommodate your Transfer Request, your request will be placed on a waiting list until it can be accommodated or until your current contract end date, when your Transfer Request expires.
- If Residence Services offers you a transfer that meets all requests on this form, this transfer request will be considered complete. If you choose to decline that offer, you must submit a new Transfer Request form, with payment, to be reconsidered.
- Transfers will not be coordinated during peak periods (August, September, December, January and April).

Today’s Date (MM/DD/YYYY) Requested Transfer Date (MM/DD/YYYY)

PERSONAL INFORMATION:

Last Name ___________________________________________ First Name ___________________________________________ Student ID Number ____________________________

Current Unit # ___________________________________________ Current Building Name ___________________________________________

Student Type (check one): □ Undergraduate Student □ Graduate Student □ Other (please specify)

Year of study at time of requested transfer date (check one): □ First Year □ Second Year □ Third Year □ Fourth Year □ Fifth Year

Reason for Transfer: ___________________________________________ ___________________________________________ ___________________________________________

Note: If you are requesting a transfer because of a roommate conflict, check off the following to indicate that you have completed the following steps before submitting this form:

□ Complete a Roommate Agreement with your roommate(s)
□ Talk to your Resident Assistant
□ Talk to your Residence Coordinator

Approval from Residence Coordinator:

Residence Coordinator Name ___________________________________________ Residence Coordinator Signature ____________________________

BUILDING/UNIT, ROOMMATE AND SPECIAL REQUESTS (IF APPLICABLE)

Tower/Floor/Room Request ___________________________________________

Roommate Request ___________________________________________

Requested Roommate Consent (signature required) ____________________________

Special Request (please describe): ___________________________________________

(Please fill in back of form to complete your application)
**PREFERRED RESIDENCE**

Please indicate the residence and unit type you wish to transfer to:

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<thead>
<tr>
<th>Residence</th>
<th>One Bedroom</th>
<th>Two Bedroom</th>
<th>Four Bedroom</th>
<th>Studio (month-to-month)</th>
<th>Furnished (month-to-month)</th>
<th>Furnished (seasonal)</th>
<th>Aboriginal Housing</th>
<th>Male</th>
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**SIGNATURE:**

By signing and submitting this form, I certify that I have read, understand and agree to the terms and conditions outlined in this form.

______________________________________________________________  _________________________________________________________
Signature                                      Date (MM/DD/YYYY)

Residence Services - University of Alberta - residence.ualberta.ca