

Housing and Residence Life Office
Residence Hall Common Area Use Application Form

Per the *Residence Hall Common Area Use Policy and Procedures*, residence hall lobbies and recreation rooms may be reserved by one or more student organizations for specific activities. To request permission to do so, a representative from the organization(s) must complete this form and turn it in to either the appropriate residence hall desk or resident director for consideration *at least* fourteen (14) calendar days before the date of the activity.

General Conditions for Common Area Use

1. Conduct. Rights of residence hall students must be respected at all times. Use of public areas must comply with rules and regulations stated in the Student Code and University Ordinances as well as all other expectations set forth by the staff responsible for supervising the area.
2. Clean-up. The area must be left clean and orderly. Trash must be placed in proper receptacles, tables wiped off, floor swept/vacuumed, furniture properly placed, etc.
3. Costs. Any costs associated with set-up for non-residence hall organizations, clean-up, or damages for a particular activity will be charged to the sponsoring group(s).
4. Disqualification. In addition to appropriate charges, failure to adhere to these conditions may disqualify the organization from future use of a residence hall common area.

Residence Hall Common Area Use Application Information

1. Sponsoring Organization(s) _____
2. Organization Adviser _____ Phone _____ E-mail _____
3. Common Area Requested. _____
4. Date of Proposed Activity _____ Time: From _____ AM/PM to _____ AM/PM
5. Description of Proposed Activity _____

Security: If this application is for an activity that involves the use of a recreation room after the residence halls have been secured for the night, describe in detail on the back of this form the steps that will be taken by the sponsoring organization(s) to ensure the security of the adjacent residence hall(s) to include the names of the group members providing supervision.

Organization Representative/Contact Person: _____ Date _____

Address _____ Phone _____ E-mail _____

Application Supported: _____ Yes _____ No

Hall Government Representative _____ Date _____

Hall Government Representative _____ Date _____

Application Approved: _____ Yes _____ No

Resident Director/Coordinator of Apt. Services _____ Date _____

Resident Director _____ Date _____