

All information you share on this document will be kept confidential

ROOM #:

HALL:

RESIDENT INFORMATION CARD

ASU ID#:

Name _____ Last First Middle	Classification _____	Fr. So. Jr. Sr. Gd.
Date of Birth ____/____/____	Prefer to be called _____	ASU Email _____@appstate.edu
Permanent Address _____ Street	Other Email _____@	
City State Zip	Your Cell Phone Number (____) _____	

Emergency Contact Person Name _____	Relationship _____
Emergency Contact Person Phone # (____) _____	Email _____@
Are there any medical conditions you have of which our staff should be aware? _____	

I am interested in learning more about the following:

- ☐ Intramural Teams
- ☐ Hall Council
- ☐ Tutoring
- ☐ Volunteer Opportunities on and off Campus
- ☐ Employment Opportunities on Campus
- ☐ Email Updates about my Residence Hall
- ☐ Email Updates about Upcoming Events Taking Place on Campus
- ☐ Joining my hall's Facebook Group
- ☐ Receiving Text Messages about Hall Activities
- ☐ Other – Please Specify _____

Missing Persons Information

According to the recent update in the Higher Education Act, all schools are required to ask students who they wish the University to call should they become missing. Please list your contact person's information below:

Name _____
Relationship _____
(____) _____@
Phone Number _____ E-mail Address _____

Your room has been prepared and inspected by University Housing and found to be clean with all amenities in good condition. Upon checking out, a staff member will inspect your room to ensure it is in the same condition as when you checked in. As stated in the Residence Hall License Contract that you signed, you may be charged for any damages since your check-in.

Signature @ Check-in	Key Code#	Date	Signature @ Check-out	Key Code#	Date
Notes on condition of room at check-in		Notes on damages/repairs to the room at check-out:		CIRCLE ALL THAT APPLY	
Inspected by _____		Inspected by: _____ Date _____		Room Change	
		Total Charge (itemized above) \$ _____		Withdrawal	
		Work orders & charges submitted _____		Express Check-out	
		Date work order submitted _____ Initials _____		Improper Check-out	
		Date RIC submitted on line _____ Initials _____		Key Returned? Y or N	
				Card Access	

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