

## Residence Hall Express **Check Out Form**

To express check out, please complete and sign this form. Please drop off form at the location indicated at your RA closing meeting and in the closing email sent by your Resident Director.

PLEASE PRINT LEGIBLY:			
Last Name		First Name	ID Number
Building	Room	Reason For Che	ecking Out
By signing this form, I u	nderstand and agr	ree to the following terms o	of the Express Check Out process:
☐ I have cleaned r ☐ I have wiped do my furniture to its ☐ I have removed ☐ I have removed ☐ If I am the last pe	my room, including wn the furniture inc s original, assemble all posters, stickers, all of my belonging erson, I have closed vite) – My suitemate	d positions. tape, sticky putty, etc., fro gs and trash from the room	m the walls, doors, furniture, and windows. and the blinds are in the closed position.
· · · · · · · · · · · · · · · · · · ·		athroom and/or furniture t mate(s)/suitemates is/are	hat you are responsible for? If yes, please not erroneously billed.
		.,	f you need more room write on the back.
	at I am not responsi	ble, I have the right to app	on to determine billing. If I am billed for any beal by following the instructions in the billing
By signing below, I agr	ee to and understo	and the terms of an Express	Check Out depicted above.
Student Signature			Date
		RA/RD Staff Use Only	
Received by (Print)		Signature	Date