



EXPRESS Check-Out Waiver

(Do not use for the Traditional Check-Out)

Please complete all of the requested information below, place your key and this form in envelope, then deposit in mailbox at RA office.

Please Print

Student ID #:	Last Name:	First Name:	Contact Phone #:
Building:	Room:	Left or Right for Dbl:	E-mail:

As I turn in my keys and vacate my room, I acknowledge that it is my responsibility to remove all of my personal belongings and trash prior to checking out. My room must be left clean and in good condition to avoid charges being assessed to my student account. I further understand that I must personally leave this form and key in the mailbox at the RA office. I understand that by using the Express Check-out I waive my right to appeal any damage charges that are assessed to my student account.

Student Signature: _____ Date: _____

Signature for Residence Life Staff ONLY:

Date/Time: _____

Key: returned

missing

Improper Check Out: Yes

No