



HOUSING REQUEST FORM

Please mail, e-mail, or fax this completed form with your Program Application by the application deadline for your term. WE REMIND YOU THAT NO RESERVATION WILL BE MADE UNTIL THIS FORM HAS BEEN FULLY COMPLETED, SIGNED, AND RETURNED TO LdM. ALL students must complete and sign this form whether they are securing housing through Lorenzo de' Medici or are making independent housing arrangements. Students making their own housing arrangements should mark that option and must sign at the bottom.

Please print

Student's full name: _____ Gender: _____

E-mail: _____ Phone: (_____) _____ Fax: (_____) _____

Date of Birth (M/D/Y): _____ Nationality: _____

Permanent home address: _____

Program city:

Florence Rome Tuscania One Semester -- 3 Cities

Program session(s):

Summer 2008 Fall 2008 Academic Year 2008-2009 Spring 2009 January Intersession 2009
 Session 1
 Session 2
 Session 3

Housing Selection:

Student Apartment through LdM

Independent Housing Arrangements ****In selecting the independent housing option and signing at the bottom of this page, I accept full responsibility for securing my housing in Italy.****

If you are requesting a room in a student apartment, please complete the following. Please keep in mind that single rooms are an extra fee and are extremely limited, and that housing requests are requests only, not guarantees. Select one: Single bedroom (not available for January Intersession) Double bedroom

If you wish to be housed with a specific person(s), please list his/her name(s) here. Please note that requests for roommates must be mutual in order to be accommodated.

ROOMMATE (if securing a double room): _____

HOUSEMATE(s): _____

PLEASE STATE ANY REQUESTS CONCERNING OTHER PARTICULAR NEEDS YOU MAY HAVE IN THE SPACE PROVIDED BELOW. LdM WILL LET YOU KNOW IF THE REQUEST CAN BE MET. REQUESTS REGARDING HOUSING MUST BE MADE ON THIS FORM.

I understand that:

1. Single rooms are very limited and that requests for singles, specific roommates, housemates, etc. may not be granted.
2. I must leave the assigned apartment no later than 12 (noon) on check-out day.
3. I must leave the assigned apartment in good condition.
4. In case damages to the apartment are found, I will be charged of my housing deposit.
5. LdM reserves the right to expel from the assigned apartment any student whose behavior does not conform to civilized standards of behavior.
6. LdM reserves the right to withhold transcripts of students who have any type of Housing outstanding debts.

* I agree to abide by the regulations of Lorenzo de' Medici.

* I authorize the use of my personal information by Lorenzo de' Medici, which will treat it in accordance with Italian Law 196/03 on privacy (this means your personal information will be used only by LdM, and will not be given to any other entity).

Student's signature: _____ **Date:** _____