

Room Selection Proxy Form

Name	7-Digit BC ID <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
UNI / Email	Cell Phone

I am submitting a Proxy Form because: (please check one)

- I am / will be on an approved study leave for the Spring Semester (forms must be submitted no later than March 1)
- I have a class or other conflict during my scheduled lottery appointment date / time.

By submitting this form, I certify my understanding of the following:

1. I have reviewed the information about the Room Selection Proxy process, available online at <http://barnard.edu/reslife/roomselection>.
2. I understand that the person I designate below as my Proxy is responsible for registering me for Room Selection and meeting all required deadlines and appointments.
3. I understand that I am bound to the room selection made by my Proxy.
4. I am encouraged to complete the Proxy Worksheet (<http://barnard.edu/reslife/forms/ProxyWorksheet.pdf>) with my Proxy to communicate my room choice preferences.
5. I understand that my Proxy must be a currently-enrolled Barnard student (in order to be able to register me for Room Selection). I may not designate a Faculty/Staff member or Columbia student as my Proxy.
6. I understand that if the person I pick as my proxy is unable to carry out their duties (due to class conflict, withdrawal from the College, etc), I will be responsible for selecting a new Proxy and submitting a new Proxy form indicating the replacement.
7. I agree to abide by all of the Terms and Conditions of Residence Hall Living at Barnard College, including conditions, policies, and procedures whether expressly stated or incorporated by reference (the Terms and Conditions will be made available online before Room Selection).
8. I understand that I am expected to pay my room fees in full at the academic year rate (room rates will be available online before Room Selection). I further understand that any room change during the course of the academic year may result in a change in my room fees.
9. I will complete and sign a Housing Contact when required by Residential Life & Housing.
10. I will abide by all cancellation deadlines should I need to cancel the room my Proxy chooses for me.

Signature	Date
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PROXY'S INFORMATION

Proxy's Name	7-Digit ID <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Proxy's UNI / Email	Cell Phone
Proxy's Signature	Date