

For office use: 431 _____ 432 _____

**KEARNEY RESEARCH & EXTENSION CENTER
DORMITORY REQUEST, APPROVAL, AND REGISTRATION**

Sponsor (Faculty) _____ Request Date: _____

Phone _____ Cell _____ Email _____

Occupant's Name _____ Sex: _____

Planned Occupancy Start: _____ Finish: _____

Reservation Type Daily _____ Weekly _____ Monthly _____

Payment Type RAC Project # _____ UC Affiliated _____ USDA only _____
(\$10/day) _____ (\$15/day) _____ (\$20/day) _____

Recharge # _____ Or Personal _____

Special Requests: _____

By requesting dorm space, the sponsoring Faculty member agrees to be responsible for the actions of the occupant. Occupants not abiding by the KREC Dormitory Management and Rules and Regulations will be asked to leave.

Faculty Signature:¹ _____ Date _____

Approved By: _____ Date _____

Note: KREC approval must be obtained before allowing dorm occupancy.

Occupant:

Name _____ Phone _____

Cell _____ Email _____

Address _____ Sex _____

Duration of Planned Stay:

Check In: _____ Check Out: _____ Frequency _____

In case of emergency, please notify:

Name _____ Phone _____ Cell _____

By registering for dorm space, the occupant agrees to read and abide by the Kearney Research & Extension Center Dormitory Management Guidelines and Rules and Regulations.

Occupant Signature:¹ _____ Date _____

¹ An email attachment is considered an electronic signature.