Housing and Residential Life
Early Move-In Request

Name: [Signature]
Sac State ID:

Assigned Building: [Signature]
Assigned Room /Space#:

Contact Phone #: (  ) – ______
Campus Email:

Requested Move in Date:

Anticipated Time of Arrival To Campus: AM or PM?

Reason for Request:

Please read and acknowledge your understanding of the following statements:

☐ I understand that there may be an additional rental fee of $20/night charged for the additional night(s) of stay and that this charge will be assessed to my University account.

☐ I also understand that meal service in the Dining Commons will not be available during the early arrival period.

☐ I understand that I am responsible for abiding by all terms and conditions of the license agreement as well as the regulations outlined in the residence hall handbook.

Student Signature: [Signature] Date:
Parent/Guardian Signature: [Signature] Date:
(Only Required If Student is Under 18 Years Of Age)

Office Only: STATUS: STAFF:
# nights: Rental Fee:? In StarRez: Posted to CMS:

Notes: