



Family & Graduate Housing Transfer Request Form

Family & Graduate Housing
Montana State University
P.O. Box 172080
1502 W. Garfield
Bozeman, MT 59715-2080

Date: _____ Student ID # _____ Phone # _____

Name of Occupant: _____ Current Address: _____

Reason for transfer request: _____

Ideal Date of Transfer: _____

Request to move to (please order by preference):

Single Students:

Families, Staff, and Faculty:

___ Grant Chamberlain Single Occupancy

___ West Julia Martin

___ Branegan Flat

___ Grant Chamberlain Roommate Situation

___ Paisley Court

___ Branegan Townhouse

___ Nelson Story/ Peter Koch Towers

___ West Side Houses

___ McIntosh Court

Number of Bedrooms: (please circle one) 1 2 3 Furnished Unfurnished

Please list anyone living in the household with you:

Name

DOB

Relationship

****Please continue this form on the back****

By signing this document I acknowledge and understand the following:

- A pre-assessment of my unit will be completed when Family and Graduate Housing has a transfer unit available. If my unit is not in good condition I will not be eligible for a transfer.
- A transfer fee of \$50 will be assessed and due **at the time the transfer takes place**
- Rent will be assessed on **both units** for the time it takes for the move to be completed
- I will be given a maximum of **five (5)** days to complete the transfer and check out of the unit that I am vacating

Signature: _____ Date: _____

OFFICE USE ONLY

Condition of current unit: GOOD FAIR POOR

Notations: _____

Recommend Transfer: YES NO

Maintenance Personnel Printed Name: _____ Date: _____

HOUSING COORDINATOR USE ONLY

Record of Payment History: Good Fair Poor

Academic History and Standing: Good Fair Poor

Tenant in Good Standing: Yes No

Notes: _____

Transfer is: **APPROVED** **DENIED**

Signature of Housing Coordinator