



DEPARTURE FORM

ROOM #

RESIDENT 1:
<input type="checkbox"/> Remove your food and take to the Student Kitchen to dispose. Bring back any glassware from kitchen/dining Hall <input type="checkbox"/> Unplug your electrical items and multiplugs. <input type="checkbox"/> Turn the radiator down to "2". <input type="checkbox"/> Clear the surface of all desks. <input type="checkbox"/> Clear the floor and the area underneath your bed. <input type="checkbox"/> Return all furniture to its original location (tables, chairs, armoires, etc.). <input type="checkbox"/> Close all windows carefully. <input type="checkbox"/> Remove all tape, paper, and/or pictures from the walls (if you are not coming back). <input type="checkbox"/> Pack all belongings and put them in your armoire (except toiletries, final banquet attire, travel clothes, and sleeping wear) <input type="checkbox"/> Put all trash inside a black garbage bag (leave the bag inside the room by your door) <input type="checkbox"/> Remove your bed linens and put them in a pile on your mattress. Put your towel on this pile. <input type="checkbox"/> Clear out all of your belongings from the bathrooms (shower stalls, sink areas, sink drawers, etc.).
Resident 1 signature: _____
Check-out completion time (RA): _____

RESIDENT 2:
<input type="checkbox"/> Remove your food and take to the Student Kitchen to dispose. Bring back any glassware from kitchen/dining Hall <input type="checkbox"/> Unplug your electrical items and multiplugs. <input type="checkbox"/> Turn the radiator down to "2". <input type="checkbox"/> Clear the surface of all desks. <input type="checkbox"/> Clear the floor and the area underneath your bed. <input type="checkbox"/> Return all furniture to its original location (tables, chairs, armoires, etc.). <input type="checkbox"/> Close all windows carefully. <input type="checkbox"/> Remove all tape, paper, and/or pictures from the walls (if you are not coming back). <input type="checkbox"/> Pack all belongings and put them in your armoire (except toiletries, final banquet attire, travel clothes, and sleeping wear) <input type="checkbox"/> Put all trash inside a black garbage bag (leave the bag inside the room by your door) <input type="checkbox"/> Remove your bed linens and put them in a pile on your mattress. Put your towel on this pile. <input type="checkbox"/> Clear out all of your belongings from the bathrooms (shower stalls, sink areas, sink drawers, etc.).
Resident 2 signature: _____
Check-out completion time (RA): _____

RESIDENT 3:
<input type="checkbox"/> Remove your food and take to the Student Kitchen to dispose. Bring back any glassware from kitchen/dining Hall <input type="checkbox"/> Unplug your electrical items and multiplugs. <input type="checkbox"/> Turn the radiator down to "2". <input type="checkbox"/> Clear the surface of all desks. <input type="checkbox"/> Clear the floor and the area underneath your bed. <input type="checkbox"/> Return all furniture to its original location (tables, chairs, armoires, etc.). <input type="checkbox"/> Close all windows carefully. <input type="checkbox"/> Remove all tape, paper, and/or pictures from the walls (if you are not coming back). <input type="checkbox"/> Pack all belongings and put them in your armoire (except toiletries, final banquet attire, travel clothes, and sleeping wear) <input type="checkbox"/> Put all trash inside a black garbage bag (leave the bag inside the room by your door) <input type="checkbox"/> Remove your bed linens and put them in a pile on your mattress. Put your towel on this pile. <input type="checkbox"/> Clear out all of your belongings from the bathrooms (shower stalls, sink areas, sink drawers, etc.).
Resident 3 signature: _____
Check-out completion time (RA): _____

DAMAGE / BROKEN:

RESIDENT 4:
<input type="checkbox"/> Remove your food and take to the Student Kitchen to dispose. Bring back any glassware from kitchen/dining Hall <input type="checkbox"/> Turn the radiator down to "2". <input type="checkbox"/> Unplug your electrical items and multiplugs. <input type="checkbox"/> Clear the surface of all desks. <input type="checkbox"/> Clear the floor and the area underneath your bed. <input type="checkbox"/> Return all furniture to its original location (tables, chairs, armoires, etc.). <input type="checkbox"/> Close all windows carefully. <input type="checkbox"/> Remove all tape, paper, and/or pictures from the walls (if you are not coming back). <input type="checkbox"/> Pack all belongings and put them in your armoire (except toiletries, final banquet attire, travel clothes, and sleeping wear) <input type="checkbox"/> Put all trash inside a black garbage bag (leave the bag inside the room by your door) <input type="checkbox"/> Remove your bed linens and put them in a pile on your mattress. Put your towel on this pile. <input type="checkbox"/> Clear out all of your belongings from the bathrooms (shower stalls, sink areas, sink drawers, etc.).
Resident 4 signature: _____
Check-out completion time (RA): _____

RESIDENT 5:
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Resident 5 signature: _____
Check-out completion time (RA): _____

RESIDENT 6:
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Resident 6 signature: _____
Check-out completion time (RA): _____

NOTES:

FOR R.A. USE ONLY
<input type="checkbox"/> SAM BACKUS <input type="checkbox"/> JANNAN JEIHANI <input type="checkbox"/> JACE EVANS <input type="checkbox"/> TANNER JACOB

I ATTEST THAT THIS ROOM MEETS THE STANDARDS SET ABOVE	_____
	Signature