

HOLIDAY BREAK FORM

Resident Name: _____ Building and Room: _____
Departure Date & Time: _____

Your RA will check your room to determine whether you have properly checked out. Failure to complete all of the items and placing this form on your door when you leave will result in a \$25.00 improper check-out fine.

Please initial next to each item to indicate that the task has been completed:

- | | | |
|---|---|-----------------------------------|
| _____ Refrigerator cleaned and defrosted (excluding Avoca & McCombs) | | |
| _____ Unplug electrical items (except fish tanks & Avoca/McCombs refrigerators) | | |
| _____ Floor swept/vacuumed | _____ Water faucets turned off | _____ Maintenance issues reported |
| _____ All lights turned off | _____ Disposed of trash properly | _____ Windows shut & locked |
| _____ Window blinds closed | _____ Toilet cleaned (Avoca) | _____ Shower cleaned (Avoca) |
| _____ Sink & sink area cleaned | _____ All holiday lights and decorations taken down | |

*We encourage residents to take home all valuables.

I verify that I have completed the required tasks and I understand that I will be held financially responsible for the condition of my room.

Resident Signature

Date

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