

IPFW Student Housing

4110 Crescent Avenue, Fort Wayne, IN 46815 T: (260) 481-4180 F: (260) 481-4182

Request for Extension

Your housing agreement ends August 6, 2011. If there are special circumstances that require a temporary extension of your move date, please complete the section below. Your request will be reviewed by the Director and you will be contacted of the status of the approval or denial.

Your IPFW student account will be charged the daily rate of your current agreement for any additional days after the end of your current agreement.

Name:	Room #:		
E-mail Address:			
tudent ID#:Phone:			ne:
Requested Move Date :			
Reason for request:			
By signing below, I authorize	the additional daily	rate charges to be added	to my IPFW student account.
Signature:		Date:	
Daily Rates for Extens	ion		
Room type	Daily Rate	# of Days	Total Cost
	•	Requested	
1 Bedroom	\$30.50		
2 Bed/ 2 Bath Deluxe	\$28.62		
2 Bed/ 2 Bath	\$26.70		
2 Bed/1 Bath	\$22.61		
4 Bed/ 4 Bath	\$23.14		
4 Bed/ 2 Bath	\$19.69		
3 Bed/ 2 Bath Private	\$19.69		
3 Bed/ 2 Bath Shared	\$17.01		
3 Bed/ 2 Bath Supersingle	\$29.62		
	FOR OFF	ICE USE ONLY	•••••
Approved Y N Mov	ve out Date:	Total Cl	harge
Authorization: Date:			