

**Hamilton College Office of Residential Life
OFF CAMPUS HOUSING AGREEMENT**

2002-2003

NAME: _____

CLASS YEAR: _____

OFF CAMPUS MAILING ADDRESS:

Telephone Number:

E-mail Address:

MEAL PLAN CHOICE

Since you have been granted off campus permission, you are required to be on at least a 5 meal plan. However, if you are interested in other meal plans, please circle your choice below.

5 MEAL PLAN

(Lunch M-F)

7 MEAL PLAN

(Any 7 meals per week)

14 MEAL PLAN

(Any 14 meals per week)

FULL 21 MEAL PLAN

(Unlimited meals)

As a student who has the privilege of living off campus this year, I agree to the following guidelines:

1. I understand that I have been granted Off Campus status for a period of one year. This Off Campus status is not transferable to any other student. Students who decide to move back on campus, after being granted permission to live off campus, may select housing after the General Housing Lottery in April, 2002.
2. I will attend a required informational meeting with Campus Safety, Village of Clinton and Residential Life representatives during the Spring semester prior to the 02-03 academic year. Please note: If you are abroad during the Spring, you must attend an informational meeting in the fall.
3. I will notify the College of my off campus address and phone number no later than 9/15/02.
4. I understand that, as a student of Hamilton College, I am accountable for my actions both on and off campus. Membership in the Hamilton community does not provide immunity from the laws and standards of local, state or national jurisdictions.
5. I understand and agree to abide by all of the conditions and guidelines of this contract. I understand that failure to sign or abide by this contract will jeopardize my off campus status.

Student Signature:

For the College:

Off Campus Community Member

Brad Moot, Assistant Director of Residential Life

Date

Date

A copy of this contract will be kept on file in the Office of Residential Life.