

CLOSING AGREEMENT

Residence Hall Room / Apartment # _____ Phone # _____ RA Initials: _____

I understand that my room/ apartment / roommate(s) and I are expected to complete all of the closing tasks listed below. I understand that my room / apartment / roommate(s) are I will split any resulting charges if these tasks are not completed. If you are responsible for particular task or damages in your apartment / room complete the appropriate space below and sign. Return this form to the duty office in your area, addressed to your Area Director.

- Remove posters, stickers, tape, decals, memo boards, and nails from walls, ceilings, and doors.
- Remove graffiti and marks from walls, ceilings, doors, and room door bulletin boards
- Clean the floor
- Clean the dresser(s) and desk(s)
- Rehang the window screens, shades, or drapes
- Assure that all college furniture is present, including recycling bin. Reassemble beds!!!
- Clean the bathroom (if you have one)
- Clean the kitchen (if you have one)
- Remove all debris from the room and from the building, including garbage and recycling

Sign below ONLY if you are accepting sole responsibility for a task/damage.

I ACCEPT RESPONSIBILITY FOR LOSS / DAMAGE / EXTRA CLEANING TO THE FOLLOWING:

Signature/Date

Signature/Date

Signature/Date

Signature/Date