Housing Accommodation Request Form

To be completed by the student. Please print and return to the Housing Office or mail to:
Murray State College Resident Housing, One Murray Campus, Tishomingo, OK 73460

____________________________________________________________________________________
Last Name ___________________________ First Name ___________________________ MI ______

_________ Male ___________ Female ________ Age ______ Email Address __________________________

Mailing Address: ___________________________ __________________________
P.O. Box or Street Address Home Phone __________________________
City, State and Zip ___________________________ Cell Phone __________________________

Please list specific housing accommodation(s) requested. Attach additional sheets as necessary. If A.D.A. accommodations are needed please contact the A.D.A. Compliance Officer at 580-319-0316.

Request:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Justification
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

(To be signed by student age 18 or older. To be signed by parent or guardian if student is under age 18)

____________________________________________________________________________________
Signature ___________________________ Date ___________________________

☐ Approved ☐ Not Approved

Bottom Portions for Approving Offices Only

Director of Resident Life ___________________________ Vice President of Student Affairs ___________________________