

OFF-CAMPUS or LEAVE-OF-ABSENCE FORM

Return form to the **House Office (D-13)**.
See the Housing Information Packet for details and deadlines.

Name: _____ Date of Graduation: _____

Present Room: _____ Phone: _____

Email: _____

Summer Address/Phone: _____

Summer Email: _____

For the Fall Semester 2007 (select one):

1. _____ I will be taking a leave of absence from Harvard.
2. _____ I will be moving off campus.
3. _____ I am considering taking a leave of absence from Harvard.
4. _____ I am considering moving off campus.

If you selected 3 or 4 above (please select one):

1. _____ I plan to participate in the lottery as part of a rooming group. I understand and have informed my suitemates that they will be assigned a floater if I decide to be off campus or On Leave in the Fall.
2. _____ I do not plan to participate in the lottery. I realize that should my plans change I can only be housed in Winthrop on a space available basis.

Signature: _____ Date: _____

Return a Housing Questionnaire when you turn in this form.