



# Weekly Boarder

## Application for Weekend Residence

NAME: \_\_\_\_\_ YEAR: \_\_\_\_\_

DORM BUILDING NAME: \_\_\_\_\_ DORM/ROOM NUMBER: \_\_\_\_\_

HOME TOWN: \_\_\_\_\_

DATES FOR WEEKEND RESIDING: \_\_\_\_\_

REASON FOR STAYING IN RESIDENCE: \_\_\_\_\_

**ENSURE THAT YOU PUT THE DATES IN THE BOXES BELOW AND MARK IN 'P' FOR THE TIME YOU ARE REQUESTING TO STAY**

FRIDAY			SATURDAY			SUNDAY				MONDAY		
/			/			/				/		
B	L	D	B	L	D	B	L	D	P	B	L	D

**ALL OF THE FOLLOWING MUST BE COMPLETED IN THE SPECIFIED ORDER BEFORE THIS REQUEST IS APPROVED AND VERIFIED:**

- 1. PARENTAL REQUEST TO RESIDE ATTACHED: YES / NO
- 2. PERMISSION GRANTED BY PRINCIPAL/ DEPUTY PRINCIPAL/S: YES / NO

COMMENT BY PRINCIPAL/ DEPUTY PRINCIPAL:

\_\_\_\_\_

PRINCIPAL / DEPUTY PRINCIPAL'S SIGNATURE

DATE

- 4. NOTIFICATION TO REGISTRAR FOR BILLING PURPOSES:

\_\_\_\_\_  
SIGNATURE

- 5. TRAVEL ARRANGEMENTS CANCELLED WITH TRAVEL OFFICER:

\_\_\_\_\_  
SIGNATURE

- 6. APPLICATION SUBMITTED TRAVEL OFFICER

**MUST BE SUBMITTED BY THE WEDNESDAY PRIOR TO THE WEEKEND THAT YOU ARE REQUESTING TO STAY IN RESIDENCE**

**NOTE: THE SCHOOL RETAINS THE RIGHT TO DENY A WEEKLY STUDENT PERMISSION TO STAY IN RESIDENCE OVER A WEEKEND**

**FREQUENT BOARDING ON THE WEEKENDS MAY RESULT IN A CHANGE OF STATUS FROM WEEKLY TO FULL TIME BOARDING**