

SUMMER HOUSING INTENT REPORT

(To be completed by May 25)

Name of Fraternity _____

Person completing form _____ Title _____

A. Please indicate which option below best describes your Summer housing plans:

Our Chapter house will be:

- _____ Open to members only
- _____ Open to Men NU Students only
- _____ Open to Women NU Students only
- _____ Open for Coed occupancy of NU Students only
- _____ Open to a special summer Group but partnering with Summer Guest Housing (specify name _____)
- _____ Closed for the summer

B. If your house will be open, please complete the following information.

1. Open from _____ to _____
(m/d/y) (m/d/y)
2. Name of Summer House Manager _____
3. Phone _____ E-Mail _____
4. Alumni House Corporation President _____
Address _____ Phone _____

C. Please indicate Room Rental Rates:

- Singles: _____ per week _____ per month _____ per summer
- Doubles: _____ per week _____ per month _____ per summer

D. Contract: Attach a copy of the contract you will use for all summer occupants.

E. Signatures (all three are required):

House Corporation President

Chapter President

Summer House Manager

NOTE: IN ORDER FOR A CHAPTER TO HAVE SUMMER HOUSING THIS FORM MUST BE SUBMITTED BY THE DEADLINE AND THE SUMMER HOUSE MANAGER MUST COMPLETE THE MANDATORY SUMMER HOUSE MANAGER TRAINING. NO EXCEPTIONS WILL BE MADE.

PLEASE RETURN THIS FORM TO OFFICE OF FRATERNITY AND SORORITY LIFE BY APRIL 30.