

**Application for Interchange of Bed within the Same Room**

**A) Details of Residents Involved:**

	Resident 1	Resident 2	Resident 3
English Name			
Chinese Name			
Student No.			
Room No.			
Gender			
Bed Being Assigned	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> L <input type="checkbox"/> R <input type="checkbox"/>	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> L <input type="checkbox"/> R <input type="checkbox"/>	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> L <input type="checkbox"/> R <input type="checkbox"/>
Preferred Bed	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> L <input type="checkbox"/> R <input type="checkbox"/>	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> L <input type="checkbox"/> R <input type="checkbox"/>	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> L <input type="checkbox"/> R <input type="checkbox"/>
Contact No.			
Signature *			

\* We, the above-named residents, hereby sign to indicate our consent to the requested changes. We will also be responsible for relocation of our own belongings.

**B) Reasons for Change:**

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**C) Bed Changing Procedures:**

1. **Application period: Check-in date to 25 Sep 2017**
2. Please fill in the form and submit it to your Hall Tutor for endorsement. Your Hall Tutor will return your form to the G4 Service Counter.
3. Within 3-5 working days after form submission, you **MUST** come to the G4 Service Counter for updating Student Card and Door Card. Failing which will result in cancellation of application without prior notification.

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**Office Use Only**

Endorsed by: \_\_\_\_\_ (HT) \_\_\_\_\_ (date)

Approved by: \_\_\_\_\_ (SHO) \_\_\_\_\_ (date)

Bed change date: \_\_\_\_\_

Copy to RCO: \_\_\_\_\_

	完成日期:	R1	R2	R3
1	更新房門咭			
2	更新學生證			
3	更新電腦資料表-HIMS			