

# SPECIAL INTEREST HOUSING PROPOSAL FORM

**Residence Life, Kutztown University**

## SPECIAL INTEREST HOUSING COMMUNITY FACULTY/STAFF CONTACT INFORMATION

Name		Name	
Title/Position		Title/Position	
Phone		Phone	
E-mail		E-mail	
Department		Department	

## SPECIAL INTEREST HOUSING COMMUNITY IDEAS

Goals of your Program	Possible Meeting Times	How many spaces in the halls are you requesting	When would you host your Office Hour?
Programming/Workshop Ideas	Social Programming Ideas	Possible Leadership Opportunities	Possible Service Initiatives

## AGREEMENT

1. All parties agree to the program model listed above
2. All parties agree to the assessment procedures listed above
3. By submitting this application, you authorize [Company Name] to make inquiries into the implementation and assessment of the Community program.

## SIGNATURES- FACULTY STAFF

Signature		Signature	
Name and Title		Name and Title	
Date		Date	

## SIGNATURES- RESIDENCE LIFE AND HOUSING APPROVAL

Signature		Signature	
Name and Title		Name and Title	
Date		Date	