



Single Room Accommodation Application

In order to apply for a single room accommodation, please complete the following information.

Full Name: _____ Class Year: _____

Email address: _____ Student ID: _____

Contact Number: _____ Gender: _____ Campus Box: _____

Building Preference (final decision will be based on availability/ need):

Please indicate housing options/ themes you are interested in:

- Greek Housing
- Residential Senior Experience
- Program Houses
- International Program

In addition to this application, you must submit the following information:

A. A written statement from the student explaining the basis for the request for a single accommodation..

If the request is based on medical need, please include supporting documentation of a medical or mental health diagnosis and requirements for a single room in accordance with the diagnosis as outlined above from a primary health care provider.

“I agree to allow the necessary College of Wooster staff to review my documentation in order for my single room accommodation request to be evaluated.”

Signed: _____ Date: _____