## Facilities Operations and Building Services Visiting Scholar/Faculty Housing Request

Use this form for Visiting Scholars or Faculty who will be sponsored by a UConn faculty member, department or school/college. Sponsors accept <u>full responsibility</u> for their Visiting Scholars or Faculty.

Requesting Departm	nent:					
Department Contac	t Name:					
Phone:			Email:	-		
Sponsor's Name			Spons	ors' Signature		
Payment Source:	$\square$ Individual					
	•	nt: Provide KFS Acco				
	(Spo	nsored Programs app	proval needed if G	rant funded)		
Tenant Information	1					
Visitor's Name:					_	
Visitor's E-mail:					_	
□Dean/Director	□Faculty	□ Post Doc	□Other:		_	
Arrival Date:			Departure	Date:	_	
Preferred accommo	odations					
# of Bedrooms		# of Bathrooms		Proximity to campus	_	
Special Requests/Li	mitations:					
Additional Commer	nts:					
Department Head's Name			Departme	Department Head's Signature		

\*Please note that the dates on this application will be the dates the Department/Guest will be billed for rent. Changes in arrival and departure dates must be approved by Facilities Operations and Building Services. If additional days are added to this contract, an additional cost will be incurred. Also, if there is a change to the Payment Source, Facilities Operations and Building Services must be notified prior to the signing of the lease.

Please submit completed form via email to FOBSRentalProperties@uconn.edu