



AURORA UNIVERSITY

**OFFICE OF RESIENCIE LIFE
RESIDENCE HALL ROOM SELECTION
POWER OF PROXY FORM**

Power of Proxy forms are not to be submitted to Residence Life prior to room selection. The forms are to be brought by the Proxy to the room selection event.

I _____ wish to give
CLEARLY **PRINT** YOUR NAME ID NUMBER (LAST 3 DIGITS)

authorization to _____
CLEARLY **PRINT** PROXY'S NAME ID NUMBER

to act on my behalf and select a residence hall room assignment for me. I understand that by giving the power of proxy to another person, I am giving him/her full responsibility for decisions about my room assignment.

I am not able to attend residence hall room selection for the following reason:

Please note the following:

- 1. Incomplete power of proxy forms will not be accepted.**
- 2. Your proxy must bring this completed proxy form to the room selection event to select your room.**
- 3. Your proxy must bring his/her AU ID to the room selection event.**
- 4. A student may proxy for only one other student. A student cannot serve as the proxy for more than one student.**

If you have any questions about the power of proxy form, please contact Residence Life at (630) 844-5446.

STUDENT SIGNATURE

DATE

PROXY SIGNATURE

DATE

FOR OFFICE USE ONLY

Form Complete _____

ID Presented _____