Form to Request Message to Alumni in Student Search for Housing Host While on Academic Assignment

Please do not combine housing requests with other students. You may not request housing for you and another person. Each person requesting housing assistance must submit their own application.

Please read before submitting request...
Due to Covid-19, we are asking you to take the following steps when seeking host/alumni housing:

1. Prior to discussing housing with a prospective host/alumni, review local Covid-19 health and safety guidelines at the host/alumni location;
2. Prior to accepting housing offers, discuss with the host/alumni any additional safety measures that the host/alumni will have in place that the student must accept, as well as any safety measures the student may request from the host/alumni;
3. Prior to accepting housing offers, discuss how the host/alumni and student will handle situations where either party must isolate or quarantine;
4. Stay current with applicable local guidelines in the weeks prior to your arrival at the host/alumni location and comply with those guidelines while at the host/alumni location.
5. Sign the waiver releasing Creighton of all liability. This can be done by clicking and accepting the box for waiver and release of liability at the end of this on-line request form.
6. Prior to moving in with a housing host, ensure your housing host has also submitted a waiver to Creighton.

Contact Information for Student Requesting Housing Host Search

First Name: ____________________________________________
Last Name: ____________________________________________
Creighton Email: _______________________________________
Cell Phone: ____________________________________________
Anticipated Grad Year: _________________________________
Net ID: _______________________________________________

Program of Study (check one):

☐ Arts and Sciences   ☐ Medicine   ☐ Pharmacy   ☐ Other
☐ Athletic Training   ☐ Nursing   ☐ Physical Therapy
☐ Law               ☐ Occupational Therapy ☐ Post Doctoral

Please provide the dates and locations of the academic assignment/clinical rotation/residency interview for which you are requesting housing assistance below.

Creighton Academic Course Number: ________________________________
Date Academic Assignment Begins: ________________________________
Date Requesting to Move into Housing: ____________________________
Date Academic Assignment Ends: _________________________________
Date Requesting to Move Out of Housing: __________________________
Site Name: _______________________________________
Site City: ____________________________________________
Site State: ____________________________________________
Site Zip Code: ____________________________________________
Within what radius of your academic assignment/clinical site location (in miles) would you like us to search for housing? (i.e. 5 miles, 10 miles, 15 miles, etc.):

Radius from Site Zip Code: ________________________________

Message to forward on to alumni exactly as it appears in this text box:  
(please include the following)

- Where (the name and exact address) and the dates and hours you will be working
- The dates you plan to arrive in the city
- Whether or not you will have a car, or if you need access to public transportation
- A brief description about yourself - where you are from, where you completed undergrad, hobbies, etc.
- What you can offer in payment (rent money, housework, meal preparation, etc.)
- The best way for alumni to get in touch with you, as they will contact you directly

As a condition of having a search to research alumni assistance with housing for you while you are on clinical assignment, we ask that you agree to the following by clicking and accepting the box before each statement:

(required)

☐ I agree to have my name and contact information released to Creighton graduates.

☐ I agree to promptly respond to ALL alumni/prospective housing hosts who contact me via email or telephone

☐ I agree to complete the post academic assignment survey and identify alumni who contacted me about housing.

WAIVER OF LIABILITY.

☐ I agree and understand that this housing arrangement is solely between host/alumni and student, and I waive any and all liability of Creighton University for any problems or losses arising from such arrangements.

___________________________________________________________

____________________
Signature Date

Online Submission for form:  https://blueq.co1.qualtrics.com/jfe/form/SV_cu87NrV87H3zSBf

Your responses will be displayed on screen once submitted. Please print or save this page electronically for your records.

Submit form to housingrequest@creighton.edu.
For questions contact Brigid Bidrowski (brigid@creighton.edu or 402.280.4742).