Faculty Information for
Summer Research Housing 2016

Student Name: ____________________________________________

Faculty Name: ____________________________________________

Title of project student will be working on:

School, Program, or Office at Hampshire:

Dates of project (please note the minimum stay is one week):

Approximate number of hours per week student will be working on this project (please note students must be working at least 25 hours/week to qualify for summer housing):

Please provide a brief description of project:

I confirm that the applicant is a currently enrolled Hampshire student who will be working with me on the project described here. I understand that in my role as sponsoring faculty, I will be advised if this student is involved in any violations of academic or behavioral policies or if there are other behavioral concerns about this student during the summer session.

__________________________________________________________
SIGN

__________________________________________________________
DATE

Full description of Summer Housing Policies can be found at https://www.hampshire.edu/housing/january-and-summer-residency-policies

Questions may be directed to housing@hampshire.edu