

Student Residence Office

Hall Resident's Authorization Letter

As hall resident, I'd like to	make a special req	quest to authorize th	ne following pers	son(s) on my behalf to
✓ the box on your acceptar	ıce			
□ enter my room, pac	ck my personal stu	off to complete my	check-out of the	SR;
□ do others:		(please sp	ecify)	
Details of the authorized pe	erson(s) are as follo	ows:		
Name: Mr./Ms.			_	(up to 2 persons)
CityU SID and/or HK	ID: _		-	
HK mobile:	_		_	
Expected date/time for	r packing:		-	(within 08:00 – 24:00)
Authorized Person(s)' res	<u>ponsibility</u>			
The authorized person(s) ar register at Security C complete the check-of	Control Office (SCO			• •
Resident's Undertaking				
 I understand it is my obconsent on my authorizi I shall alert my authorize communication on real- I hereby authorize Secution I shall assume full liabi 	ing 3 rd party to pack rized person(s) fo time), complete the arity Control Office	k the stuff in the room r correct packing of e packing and chece to open my room/	om on my behalf of my stuff (if a k-out at one occa drawer at my ab	necessary via video- asion; sence;
Name:	SID:	Hall:	Room:	Bed:
Signature :	Date:			
_		curity@cityu.edu. arrival of your au		
SRO Use:				

Form Received on: _____ Follow-through by: _____ IC: _____