



## South Carolina Area Health Education Consortium (AHEC) Student Housing Agreement

**As a part of your community based rotation, housing may be provided for you in one of the four South Carolina Area Health Education Consortium regional AHEC regions. Housing provisions will vary by location.**

I understand and agree that once housing has been arranged and available it is my responsibility to communicate with the regional AHEC Health Professions Student (HPS) Coordinator prior to arrival. I understand and agree that any housing cancellation must be immediately communicated to the AHEC by me (the student) and no other person, including the academic clerkship coordinator. I understand and agree that there is a **30-day cancellation policy** for all AHEC housing. If I fail to cancel a housing reservation 30 days' prior the start day of a rotation, then I am subject to a **\$200 housing fine** and risk forfeiture of future use of AHEC housing. **Student initials** \_\_\_\_\_

I understand and agree that AHEC is not responsible for the loss of my personal property (including automobile and contents) or for my personal liability while I am residing in AHEC housing and that it is my responsibility to obtain insurance coverage for any loss which I may sustain due to fire, theft, flood, winds, or any other cause while I am residing in the AHEC housing. **Student initials** \_\_\_\_\_

AHEC encourages students to purchase personal renter's insurance that covers the student's contents (personal property) and personal liability while the student resides in AHEC housing or to ascertain with his or her personal insurance carrier that the current policy held by the student, if any, covers the student's contents and personal liability while the student resides in the regional AHEC housing. **Student initials** \_\_\_\_\_

I understand and agree that I may have roommate(s) assigned by the AHEC during all or part of my stay; one person apartments and/or private bedrooms are not available and no such requests can be honored. **Student initials** \_\_\_\_\_

I understand and agree that no guests are allowed even if I am the only student staying in the apartment. I understand and agree that only students assigned by the regional AHEC are allowed to stay in the housing. I understand and agree that the **first** violation of this rule may constitute automatic forfeiture of my stay in AHEC housing. **Student initials** \_\_\_\_\_

I understand and agree **no pets** are allowed. I understand and agree that the **first** violation of this rule may constitute automatic forfeiture of my stay in regional AHEC housing. **Student initials** \_\_\_\_\_

I understand and agree that I will be considerate of my neighbors and roommates at all times and not create or allow any disturbance to their peace and quiet. **Student initials** \_\_\_\_\_

I understand and agree that I will not duplicate keys or change locks during my occupancy and I will follow the appropriate instructions given for key return. I will keep the housing locked and secured at all times. If the regional AHEC housing has a lock box code, I understand and agree to not give the code to anyone else. **Student initials** \_\_\_\_\_

I understand and agree that the room in which I am assigned is the room in which I will inhabit for the duration of my rotation. I will not move rooms, regardless of the circumstances, unless the move has been approved by the regional AHEC HPS coordinator. **Student initials** \_\_\_\_\_

I understand and agree that the keys that I have been assigned, that correspond to the room that I have been assigned, are the only keys that I will use. Any other set of keys, to any other room in regional AHEC housing, will be kept in its designated place for the appropriate student. **Student initials** \_\_\_\_\_

I understand and agree that all regional AHEC housing is “**smoke-free**” and “**drug-free**”. Absolutely no smoking or drugs are allowed at any time. I understand and agree that the **first** violation of this rule may constitute automatic forfeiture of my stay in regional AHEC housing. **Student initials** \_\_\_\_\_

I understand and agree that firearms (and other lethal weapons) are not permitted in the regional AHEC housing and the **first** violation of this rule will constitute automatic forfeiture of my stay in the regional AHEC housing. **Student initials** \_\_\_\_\_

I understand and agree that improper use of the internet (for example, illegal downloading of movies, etc.) in the regional AHEC housing will not be tolerated and the **first** violation of this rule may constitute automatic forfeiture of my stay in AHEC housing. I understand and agree that I am not to change any passwords or security questions for the provided internet. **Student initials** \_\_\_\_\_

I understand and agree that I will be charged a fee for removing, damaging, or tampering with furnishings and contents of the room/apartment. The furniture is **not** to be re-arranged and no items are to be hung on the walls. **Student initials** \_\_\_\_\_

I understand and agree that I will keep the housing neat and tidy during my occupancy. I understand and agree it is my personal responsibility to take out my trash every week to the proper receptacle and return the trash cans to their proper place of storage. **Student initials** \_\_\_\_\_

I understand and agree that the regional AHEC has the right to enter the housing without notice for inspection, repairs, inventory, and/or cleaning. **Student initials** \_\_\_\_\_

I understand and agree that it is my personal responsibility to contact the regional AHEC HPS coordinator and/or the designated maintenance person should I become aware of any appliances, heat/air conditioning, or other problems with the apartment. **Student initials** \_\_\_\_\_

I understand and agree that it is my personal responsibility to act responsibly and exhibit professional behavior at all times. This includes acting in a respectful manner and not disturbing the host or other students at the regional housing location. **Student initials** \_\_\_\_\_

I understand and agree upon my departure, I will thoroughly clean my room/apartment. I will remove all food from the cabinets and refrigerator. I will empty all trash to the proper receptacle. I will return the thermostat to the prescribed level and make certain all appliances are turned off. I understand that if my apartment is left unclean I will be charged a cleaning fee. **Student initials** \_\_\_\_\_



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I have read, understand, and agree to adhere to the SC Statewide AHEC Housing Agreement as well as the regional AHEC housing guidelines and rules provided at the individual housing location.

I understand that I will be financially responsible for any damage, loss of contents, excessive cleaning expenses, lock-out fees, or local services purchased by myself (costs vary among AHEC regions).

I understand that the AHEC will report any failure to adhere to the AHEC Housing Agreement and individual location guidelines and rules to my Clerkship Director.

This agreement will be terminated on the last day of the course assignment in the AHEC community setting.

I have read and understand my responsibilities regarding AHEC housing and the consequences of canceling my housing after the deadline.

Rotation Begin Dates: \_\_\_\_\_ Rotation End Date: \_\_\_\_\_

Assigned Preceptor and Location: \_\_\_\_\_

Rotation Site: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

AHEC Area (circle one): Lowcountry AHEC Mid-Carolina AHEC Pee Dee AHEC Upstate AHEC

\_\_\_\_\_  
Student Name Printed

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date



Mid-Carolina AHEC  
"Excellence in Health Care Through Education"



Pee Dee AHEC  
Excellence in HealthCare Through Education

Upstate AHEC  
Excellence in Health Care Through Education

Serving South Carolina's Communities Since 1972