



LORAS COLLEGE™

## Health Center

1450 Alta Vista St. | Dubuque, IA 52001 | Phone: (563) 588-7142 | Fax: (563) 588-7659

### Air Conditioners In Loras College Student Housing

Due to safety restrictions and electrical load limitations, a limited amount of air conditioners will be approved based on physician documentation of medical necessity. Students requiring an air conditioner must submit an air conditioner request form that has been completed, signed and stamped by their attending physician. This documentation must be submitted each academic year. Approval of an air conditioner in the past does not guarantee the continued use of an air conditioner.

**The student will provide their own air conditioner, not to exceed 5200 BTU's, complete with side curtains and appropriate angle stops to facilitate installation.** Window modifications are not allowed. Loras College does not provide air conditioners.

The student may install their own air conditioner. To ensure the unit is secure in the window, the student should submit a request via email to [fixmyroom@loras.edu](mailto:fixmyroom@loras.edu) for the maintenance department to check the air conditioner.

The maintenance department will install the student's air conditioner, if requested. The student should submit a request via email to [fixmyroom@loras.edu](mailto:fixmyroom@loras.edu) for the maintenance department to install the air conditioner.

The Required Health Information Form and vaccine record (an **official signed and stamped record** showing proof of receiving **2 MMR** immunizations on or after their first birthday and at least 30 days apart **OR** laboratory evidence of immunity (Rubeola and Rubella titers and Mumps IgG immune status) must be on file in the Health Center before the air conditioner request can be approved.

Air conditioners must be removed by October 30 unless the physician authorizes a request for an extension. Please contact the Health Center for approval if the air conditioner is needed during the spring semester.

Students must submit the completed air conditioner request form by July 31 to:

Loras College Health Center

1450 Alta Vista

Dubuque, IA 52001

Phone: (563) 588-7142

Fax: (563) 588-7659

Email: [tammy.marti@loras.edu](mailto:tammy.marti@loras.edu)

The Loras College Health Center will notify the student via email if their request has been approved or denied.



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### Air Conditioner Application in Loras College Student Housing To be Completed by the Attending Physician

Student Name: \_\_\_\_\_ Birthday: \_\_\_\_\_ Residence Hall: \_\_\_\_\_ Room #: \_\_\_\_\_

1. Semester requesting to use an air conditioner: \_\_\_\_\_ Sport: \_\_\_\_\_

2. How long has this student been under your care: \_\_\_\_\_

3. Type of Allergy or significant medical condition: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Symptoms: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Prescription medication taken to manage symptoms: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Over-the-counter medication taken to manage symptoms: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. Is the student receiving allergy shots: \_\_\_\_\_

8. Are symptoms:  Continuous  Intermittent  Seasonal

9. Severity of symptoms:  Mild  Moderate  Significant

10. To manage the students' allergies, is the use of an air conditioner:

Desirable:  Yes  No Essential:  Yes  No

11. To manage other medical conditions the student may have, is the use of an air conditioner:

Desirable:  Yes  No Essential:  Yes  No

**SIGNATURE, DATE AND OFFICE STAMP ARE REQUIRED FROM THE PHYSICIAN**

\_\_\_\_\_  
Signature Date Office Stamp: