

HOUSING CONTRACT TERMINATION REQUEST

THIS FORM TO BE USED ONLY WHEN THE OPTION IS NOT AVAILABLE IN THE HOUSING PORTAL (in StarRez)

Name: _____ SE ID #: _____ Cell Phone #: _____
Last Name First Name

SE e-mail address: _____ Term(semester) of the Agreement to be cancelled: _____

1. Have you moved into your assigned room (and been issued a key)? Yes No. I do not plan to move in.
2. Current Room Assignment: Building: _____ Room #: _____
3. As of the end of the last semester, had you successfully completed 24 credit hours (not counting concurrent courses)?
 - a. Yes (continue below)
 - b. **No – You cannot cancel your Housing Contract unless/until you have been approved to live off-campus.** You must attach a copy of the letter which approved your release from the Residency Requirement. **Is the Residency Requirement Release Letter (email) is attached to this document?**
 - i. Yes (continue below.)
 - ii. No. - **Your Housing Contract will remain in effect and you will continue to accrue contractual charges until/unless you are released from the Residency Requirement.** (In order to be considered to be released to live off campus, complete the Freshmen Residency Requirement Waiver Request Form and submit it, along with any required documentation to the Housing & Residence Life Office. The process of approving a release may take several weeks.)
4. Reason for canceling your Housing Contract:
 - a. I have completely withdrawn from the University (and have attached a copy of the signed Withdrawal Form).
 - b. I got married (and have attached a copy of the Certification of Marriage).
 - c. I am not happy with the meal plan requirements.
 - d. I am not happy with the Residence Hall Policies.
 - e. I am graduating or student teaching during the Spring Semester (please circle the appropriate choice)
 - f. I am not happy with the physical condition of my room (Please explain below.)
 - g. I have received activation orders from the military (and have attached a copy).
 - h. Other (please explain): _____
5. Meal Plan
 - a. I would like to continue my meal plan.
 - b. I would like to terminate my meal plan, starting on the following date: _____
6. I plan to check-out on the following date: _____, pending completion of all required 'check-out procedures. I understand that **I must check-out by returning the Residence Hall key(s) to the Housing & Residence Life Office during regular business hours.** I understand that I will continue to accrue charges as long as I do not complete the Check-Out Procedures AND return my key. I understand failure to complete all check-out procedures may result in additional related charges.

By submitting this form, I am affirming that I have reviewed the Housing Contract Terms & Conditions, including the portion on Contract Termination, and am aware of all related charges.

Signature of Student: _____

Date: _____