



HOUSING & RESIDENTIAL LIFE LICENSE AGREEMENT CANCELLATION REQUEST FORM

Office Use Only
Documentation Provided [] Yes [] No
Request Discussion Date _____
Request Granted [] Yes [] No
Letter Sent _____
Approval: _____

Please Print:

Name: _____

Email: _____

Effective Semester: _____

ID Number: 900 _____

Phone: _____

I am requesting a waiver for:
___ Room & Board License Agreement Late Cancellation Fee (\$400.00)
___ Spring semester charges (breaking academic-year room & board license agreement)
___ Room/Board charges after my check out (partial housing refund)
___ Improper Check-Out Fee
___ Cancelling room/board mid-semester
___ Other _____

Please describe reason for request:

Please attach any supporting documents.

Student Signature

Date