

RESIDENCE HALL AGREEMENT RELEASE APPLICATION

RELEASES ARE NOT GUARANTEED. DO NOT SIGN AN OFF-CAMPUS LEASE.

This application will be reviewed and you will be contacted as to the decision by mail and your SRU email account. It may take four-six weeks to receive a response. **YOU WILL BE CHARGED THE APPROPRIATE HOUSING AND DINING FEES UNTIL YOUR RELEASE IS APPROVED. AGAIN, DO NOT SIGN AN OFF-CAMPUS LEASE.**

Name: _____
Last First MI

Current Hall Address: _____

Banner ID (EX: A0012345): _____

SRU Email address and Personal Cell Phone Number: _____

Release to Begin (Please insert the appropriate year after each term in question): Fall _____ Spring _____

NOTE: SITUATIONS INVOLVING ROOMMATE CONFLICTS OR THE RESIDENCE HALL ENVIRONMENT ARE NOT CONSIDERED GROUNDS FOR CONTRACT RELEASE

I am requesting to cancel my residence hall or R.O.C.K. apartment residence hall agreement for the following reasons (*please check all that apply below*):

_____ I have, or a member of my immediate family, has developed a serious health issue that would require my living outside the residence hall. (*You must attach **MEDICAL DOCUMENTATION** to verify the serious medical condition you or an immediate family member is experiencing.*)

_____ I am experiencing an **EXTREME** financial hardship that was not present when I contracted for University housing. (*You must attach clear documentation that verifies the financial hardship you are describing.*)

_____ I am now married. (*You must attach a copy of your marriage certificate*)

_____ **Other.** You may explain your situation by attaching a detailed and clear letter to this application. (**You also must attach any documentation available to substantiate the claim you are making in your application.**) **Please note attaching a notarized letter is not immediate grounds for release to commute from home.**

Student Signature

Date

DO NOT WRITE BELOW THIS LINE

RESIDENCE HALL AGREEMENT ACTION

Date Application Received: _____ Application Received By: _____
Date Application Reviewed: _____

Action: _____ Approved _____ Denied

Attach decision letter to this application

**PLEASE RETURN THE COMPLETED FORM AND ALL SUPPORTING DOCUMENTATION TO
THE OFFICE OF HOUSING & RESIDENCE LIFE
105 WATSON HALL, 1 MORROW WAY, SLIPPERY ROCK UNIVERSITY, SLIPPERY ROCK, PA 16057**