

GENERAL INSTRUCTIONS

This form is for requesting release from an existing contract/housing agreement. The housing contract is a legally binding agreement and you are expected to honor the terms of the agreement. There is no appeal process; all decisions are final.

1. **Complete both sides of this form.** Be sure to include all relevant information. Anything omitted will not be reviewed after a decision is made. If you need to include additional sheets to completely explain your circumstances, please do so.
2. You should consider any request denied until you are notified it has been approved. Note: if a request is approved, you could be liable for a minimum \$350 cancellation fee.
3. Please retain a copy for your records and submit the original application to the Office of Residence Life, 4001 W. McNichols, Shiple Hall 115, Detroit, MI 48221; or email to reslife@udmercy.edu
4. **Please note that you are not approved for release until you receive official written notification from the Office of Residence Life (this may be in the form of electronic correspondence).**

PLEASE PRINT

Today's Date: _____ Student ID:

Name: _____
Last First Mi

Date of Birth: _____ Gender: F M Status: Double Single

Building and Room Number: _____ Mailbox Number: _____

Permanent Address: _____
Street City State Zip

Permanent Phone: Cell-phone Number:

E-mail Address: @udmercy.edu

I am applying for release for the following term(s). Please include the year for each term (i.e. 2017):

Fall Semester _____ Winter Semester _____ Summer Semester _____

RELEASE FROM THE HOUSING AGREEMENT: I am applying for a contract release for the following reason(s):

- Medical concern
- Graduating (Letter from Registrar's office required)
- Study Aboard/Co-op Assignment
- Marriage (License required)
- Transfer/Withdrawal from UDM
- Other (Please explain on back)

For Residence Life Use Only			
Date Removed from Banner _____		Amount Charged \$ _____	
Notified:	Student <input type="checkbox"/>	Dining Services <input type="checkbox"/>	Health Center <input type="checkbox"/>
	SAO <input type="checkbox"/>	Put in Spreadsheet <input type="checkbox"/>	Changed on Floor Chart <input type="checkbox"/>

Please continue on the back

Please use the space provided below to describe your reasons for requesting a contract release. Attach additional sheets if needed. It is important that you include ALL relevant information that you want considered in the decision. Anything omitted from this application will not be taken into consideration after a decision is made. All decisions are final. There are no appeals. Only cases of demonstrated hardship that have occurred since the signing of the residence hall agreement/contract will be considered.

I acknowledge that all information contained on this request is true.

Signature of Student

Date

Return to the Office of Residence Life, 4001 W. McNichols, Detroit, MI 48221 Email- reslife@udmercy.edu Phone: (313) 993-1230

For Office Use Only

Fees

Approved Reason: _____ \$ _____.

Denied Reason: _____ \$ _____.

Staff Signature: _____ Date: _____