

HOUSING CANCELLATION FORM

STUDENTS WHO WISH TO CANCEL CAMPUS HOUSING MUST SIGN THE CANCELLATION FORM BELOW AND RETURN IT TO THE HOUSING OFFICE

NAME: _____ ID# _____

RESIDENCE HALL _____ ROOM NUMBER _____

EMAIL ADDRESS _____

CANCELLATION AGREEMENT

In accordance with the Student Housing and Board Agreement, I hereby declare I will not return to University Housing for:

Fall Semester 20 ____ Spring Semester 20 ____ Summer 20 ____
and therefore, request that said Agreement be cancelled.

REASON FOR CANCELLATION:

Academic _____ Financial _____ Moving Off Campus _____

Other _____

HOME ADDRESS: _____ CITY: _____

STATE: _____ ZIP _____ PHONE () _____

Please check one:

I will _____ I will not _____ remain in the University as a student.

I understand it is my responsibility to read the cancellation policy prior to submission of this form.

SIGNATURE: _____ DATE: _____

DEADLINE FOR HOUSING REFUNDS OR CREDITS:

FALL SEMESTER (APRIL 01) SPRING SEMESTER (NOVEMBER 01)

THIS CANCELLATION FORM WILL BE PROCESSED IN CONJUNCTION WITH THE HOUSING CANCELLATION POLICY WHICH IS LOCATED ON OUR WEBSITE AT www.xula.edu/housing.

Revised 03/2012