Instructions for Request for Release from the Student Housing License Agreement

The Housing & Residential Education License Agreement is binding for the entire academic period that the license agreement is contracted for. The provisions for obtaining a contract release are outlined and provided in part below.

Requesting Release
A student may request release from the license agreement and be considered for approval under the following circumstances:

- **Marriage** during the term of the license. Certified copy of marriage certificate is required.
- **Student status change** which includes withdrawal from all classes, graduation, medical withdrawal, except in cases of housing or university conduct violation. Provide documentation verifying disenrollment.
  - **NOTE:** HRE does verify enrollment each term and will reinstated license fees for any licensee that is released for reason of “change in student status” and is later found to be enrolled.
- **Hardship Consideration:** In the event of an extreme change in financial, medical, or personal situation since entering into the housing agreement, release from the housing agreement may be possible. Documentation of this change is required and must prove the severe difficulty or impossibility of continuing in the license, as determined by Housing & Residential Education. This is a subjective consideration for the student and for the University. Hardship requests are reviewed and may be approved or denied based on the severity of the hardship and whether or not it could have been foreseen when the license was originally signed.

PLEASE NOTE: Qualifying residents must complete the Request for Release from the Student Housing License Agreement on the reverse, attach a letter that describes the circumstances that necessitate a release, and include any additional documentation verifying the request; for example, a doctor’s note or documentation of employment termination.

Letters must be addressed to Janel Suliga, Director of Housing Services and Operations. Approved requests will be effective no fewer than 30 days after the date of the request; therefore, early request is advised. Requests are never approved simply because a resident would prefer to live off-campus.

Cancellations
Please refer to sections 7 and 8 in the Student Housing License Agreement for full terms and conditions.

**Academic Year License Cancellation (for students who moved in fall 2017):**

<table>
<thead>
<tr>
<th>License Cancellation Requested</th>
<th>Cancellation Penalty</th>
</tr>
</thead>
<tbody>
<tr>
<td>On or before June 5, 2017</td>
<td>No financial penalty</td>
</tr>
<tr>
<td>Between June 6 and July 3, 2017</td>
<td>$100 penalty</td>
</tr>
<tr>
<td>Between July 4 and July 26, 2017</td>
<td>$200 penalty</td>
</tr>
<tr>
<td>After July 26, 2017</td>
<td>$200 plus a pro-rated room and board fee</td>
</tr>
</tbody>
</table>

**New Spring 2018 License Cancellation (only for students starting residency in January 2018):**

<table>
<thead>
<tr>
<th>License Cancellation Requested</th>
<th>Cancellation Penalty</th>
</tr>
</thead>
<tbody>
<tr>
<td>On or before November 20, 2017</td>
<td>No financial penalty</td>
</tr>
<tr>
<td>Between November 21 and December 20, 2017</td>
<td>$200 penalty</td>
</tr>
<tr>
<td>After December 20, 2017</td>
<td>$200 plus pro-rated room and board fee</td>
</tr>
</tbody>
</table>

**Appeals**
After a decision is rendered, a resident who wishes to appeal the decision has three business days to submit their request in writing to Cindy Derrico at **cindy.derrico@csuci.edu**, Associate Vice President for Student Affairs - Housing & Residential Education and Associated Students, Incorporated.
Request for Release from Student Housing License Agreement

Please print legibly in all required areas:

Name: ____________________________  Today's Date: ____________

Student I.D. #: ____________________  Village Location & Room#: __________________________

Cell phone number, or best contact number: (__________ ) ______________ - ___________________

All correspondence will be sent through your myCI email account: ______________________@myci.csuci.edu

Please check the provision that applies:

☐ Cancellation request prior to occupancy on or before cancellation dates listed below
  (cancellation penalties apply),
    ☐ July 26, 2017 for the Academic Year Licensees for 2017-18
    ☐ December 19, 2017 for NEW Spring 2018 Licensee only

☐ Marriage during the license period

☐ Change in Student Status (you are not, or will not be enrolled for Fall 2017 or Spring 2018)
  (NOTE: Check only one section of boxes below as it applies to your reason for cancellation request)
    ☐ I will no longer be an enrolled student at the University as of ________________
    ☐ I am graduating at the end of the Fall 2017 semester
    ☐ I am an International student and my program of study at CI is only for Fall 2017 semester

☐ Hardship circumstance

The following documentation is required to evaluate your request for release:

- A letter requesting release from the license which describes the circumstances.
- A copy of your financial aid letter or status (if you are requesting release due to a financial hardship)
- Any other documentation which will verify/substantiate the request.

I am requesting release from my Housing & Residential Education License Agreement. I understand that submission of this request does not constitute approval, and I remain liable for the full term of the license agreement until I have been notified otherwise. I understand that it may take up to three weeks to review my request and receive a response. I understand that approved requests will be effective no fewer than 30 days after the date of the request. I understand that if I am approved to be released from my Student Housing License Agreement but I decide to stay living in Student Housing, I must reapply and take the risk of being placed on a waitlist.

Student Signature __________________________

For office use only

☐ Approved  ☐ Denied  Effective cancellation: __/__/____  Number of days to be charged: ________________

RRLA Received Prior to Start Date of Occupancy: YES ☐ NO ☐ If NO, receipt date of RRLA: __________

Reviewer's notes: ____________________________  Staff: ____________________________  __/__/____

Emailed decision: __/__/____  Scheduled move-out: __/__/____  Cancellation: $________  Improper check-out: $________

Fee charged: (Room) $________  (Board) $________  Adjustment completed: __/__/____

Occupancy Updated: __/__/____  Staff: ____________________________

Check-Out form: __/__/____
  ☐ RIF received  ☐ Key received  ☐ Request room cleaned
  ☐ Cancellation log  ☐ Meal plan log  ☐ Service indicator  ☐ Scanned to SR ________

Group #: __________

Deposit #: __________

Date: __/__/____

Payment Type: ________