

WESTERN CAROLINA UNIVERSITY
DEPARTMENT OF RESIDENTIAL LIVING

Housing Cancellation Form

Name _____ ID# _____

Residence Hall _____ Room # _____

Suite Box # _____ Cell Phone # _____

Please make sure that you are eligible to commute according to Policy 96.

Date moving out of hall _____

Cancellation is for Fall _____ Spring _____ Summer _____
(year) (year) (year)

Reason for leaving residence hall (Check one):

_____ Graduation

_____ Medical reason (A physician must certify the medical reasons or injury that necessitates a student's need to live off campus or withdraw from the university. Western Carolina University can provide on-campus housing that meets most medical needs. If the University can provide accommodations that meet the documented medical needs, the Residence Hall Agreement will not be cancelled. Requests for residing off campus due to allergies/asthma are typically not approved)

_____ Marriage (Please attach a copy of the marriage certificate.)

_____ Academic or disciplinary dismissal* from the university. Students who are removed from the residence halls for a violation of the Code of Student Conduct, but remain enrolled in the university will be billed an early termination charge. Students who are subject to the residency requirement will be required to pay the room rate and meal plan fees for any remaining terms needed to satisfy the residency requirement.

_____ Participation in a WCU educational program, outside of Jackson County, that requires living off campus while attending three hours of class per week or less on the Cullowhee campus.

_____ Official withdrawal from the University.

_____ Dependent children (Please attach a copy of the certificate of birth, adoption, or other custody paperwork).

_____ Military: Called to active duty. (Please attach a copy of the deployment papers).

_____ Moving off campus*

_____ Other*(please explain): _____

*Subject to the contract cancellation charge.

All students moving out of the residence halls must properly check out with a Resident Assistant and return all keys. Failure to do so will result in an improper checkout charges and possibly other charges. Students who cancel their contract after June 1 for reasons that are not listed above are subject to a contract cancellation charge. Please return form to WCU Department of Residential Living, 417 Central Drive, Brown 225, Cullowhee, NC 28723

For Office Use Only

RCR: _____ CA HSG/MP: _____

Cancellation Charge: _____ Fine Form: _____

Authorized Signature: _____

Signature: _____

Date: _____