

## **Contract Cancellation Form**

This form is applicable to students canceling a contract or departing from a room prior to the assigned contractual end date. In signing this document the student understands that it is his/her responsibility to read the cancellation policy and contractual agreement prior to submission of this form. Fill out the form to the fullest extent and return to the Office of Residence Life.

## STUDENT INFORMATION

SNDW	STUDENT INFORMATION							
	Student Name:							
COLLEGE	Badger ID#:			Cell Phone:				
	Email:							
RESIDENCE	Building: (Circle the building where you currently live)			Room #:				
	Anderson	Castilleja	Cottages	Contract Type: (Circle which contract type y	ou signed for)			
150 East College Avenue Ephraim, UT 84627	Greenwood	Mary Nielson	Nuttall	Academic Year	Fall Only			
www.snow.edu/housing	Snow Hall	Suites at Academy Square		Spring Only	Summer			

150 East College Avenue Ephraim, UT 84627 www.snow.edu/housing housing@snow.edu 435.283.7280

## CANCELLALTION INFORMATION

In accordance with the Residence Life Handbook and the Housing and Dining Services Contractual Agreement, I hereby declare I will not return to Snow College On-Campus Housing for the following semester(s): □ Fall 20\_\_\_\_ □ Spring 20\_\_\_\_ □ Summer 20\_\_\_\_ **Reason(s) for Cancellation/Departure** (circle all that apply)

Reason(s) for C	ancenation, Departure (circle an that app	<u>JIY)</u>				
Academics	Lost Scholarship/Financial Aid		Moving Home w/Family		Military Duty	
Transferring	Moving to Off-Campus Student Housing	ving to Off-Campus Student Housing Gra		Financial Hardship		
Other:						
Are you withdrawing from Snow College? (dropping classes and no longer attending)					NO	
Departure Inform	nation					
🗌 I have ne	ever occupied my assigned room.					
I intend to leave on (date) at		at	(time) after occupancy.			

I hereby request the Office of Residence Life cancel my contractual agreement for on-campus housing for the term(s) indicated above. I understand this form does not cancel my meal plan and that I must submit a separate Meal Plan Cancellation Form. I realize that certain cancellation penalties will apply, per terms of the contractual agreement, which I signed when I applied for housing. I also understand that by signing this document I forfeit any rights to the assigned room as of the date received.

Student Signature:

Date:

Parent Signature (If Student is under 18):

OFFICE USE ONLY

Notes: