



Residential Life and Housing/Dining Contract Cancellation Form

Name: _____ ID#: _____

Campus Address: _____ Phone Number: _____

Permanent (Home) Address: _____

Please answer the following:

Are you requesting to be released from your Room Only? Yes No If yes, date effective: _____

Are you requesting to be released from your Room AND Meal plan? Yes No If yes, date effective: _____

Are you withdrawing from RIC, graduating, or studying abroad? Yes No If yes, date effective: _____

Do you plan to move to your home address or a local off-campus apartment? Home Address Local Apt.

In the event that your request is denied, will you remain living in your room? Yes No

If you answer no to this question, you must immediately vacate your room on the effective date listed above.

Please indicate the type of release you are requesting. Please include a personal statement supporting why your cancellation request should be granted. Please include all relevant documentation for your type of request.
ex: doctor notes, letter from the financial aid office in support of your request, etc.

All requests must be submitted to the Director of Residential Life and Housing.
Electronic submissions can be sent to housing@ric.edu

_____ Financial Letter of Support/Documentation Attached? Yes No

_____ Medical Letter of Support/Documentation Attached? Yes No

_____ Personal Letter of Support/Documentation Attached? Yes No

_____ Other Letter of Support/Documentation Attached? Yes No

I understand that by completing this appeal cancellation request that my housing status has not changed. The request will be reviewed by the Office of Residential Life and Housing. Students whose cancellation request is denied will remain assigned and are responsible for paying the various fees/costs associated with on-campus housing for the fall and spring semester(s).

Student Signature: _____ Date: _____

For Office Use Only

Date Received: _____

Logged: _____

Appeal Granted on: _____

Appeal Denied on: _____