

OFFICE OF HOUSING/RESIDENCE LIFE
AUSTIN PEAY STATE UNIVERSITY
CONTRACT RELEASE APPEAL FORM

Please print or type.

Name: _____ SSN: _____

Campus PO or Local Address: _____ Phone: _____

Campus e-mail Address _____ Classification: FR SO JR SR GRAD

Permanent Home Address: _____ Phone: _____

Current Contract Period: Academic Year (Aug.-May) Summer Spring Only (Jan.-May)

Send Results To: Campus Address/Local Address E-mail Address Permanent Address

Please indicate which term(s) you are petitioning to be released from your Residence Hall License Agreement. Check all that apply. Academic Year (Aug-May) Spring Semester Summer Semester

Please check all of the following reasons that apply to you.

- Extreme Medical Problems* (*Doctor's statement required*) Change in Family Status* (*marriage, child, etc, documentation required.*)
 Academic Suspension Graduation Change in Student Status (*i.e. not enrolling, transferring*)

**Please note that decisions are based on the information provided by the student. It is the responsibility of the student to provide any documentation that supports their request to be released from their contract. Failure to provide appropriate, current supporting documentation prior to the review of the appeal may delay the decision making process or may result in the appeal being denied due to lack of information or documentation. A decision to the appeal will be forwarded to the student within 10 (ten) business days AFTER the decision has being made.*

Please provide any specific information: _____

_____ . Continue on extra sheet if needed.

If released, my intended off campus residence is: _____

I verify that the above information is accurate and understand providing false information is grounds for immediate denial of my appeal and may result in disciplinary action. I also understand that this petition does not defer any payments that are due. If I am released from my housing contract, I forfeit my \$100 housing deposit. Adjustments will be made to my account when and if my appeal is granted.

Student Signature

Date

FOR OFFICE USE ONLY

<p>Date scheduled for review: _____</p> <p>Received by: _____ Housing Staff Signature Date</p>	<p>Housing Contract Hearing Board Decision</p> <p><input type="radio"/> Granted <input type="radio"/> Granted, with exception to enrollment status <input type="radio"/> Granted, contingent upon not being enrolled at APSU <input type="radio"/> Denied, failed to show enough cause <input type="radio"/> Denied, failed to provide adequate documentation</p> <p>_____ Appeal Board Chair Signature Date</p>
--	---

White Copy: Housing/Residence Life File

Yellow Copy: Student

Pink copy: Hearing Board File