

ANGELO STATE UNIVERSITY
EXEMPTION REQUEST / CONTRACT CANCELLATION REQUEST

NAME: _____ CID: _____
(Last) (First) (MI)

PERMANENT ADDRESS: _____
(Street) (City) (State) (Zip)

CURRENT HALL & ROOM NUMBER: _____ PHONE: _____
(N/A if not applicable) (Number you may be reached at)

I am requesting a cancellation for the following contract period: _____ (i.e. Academic Year, Spring only, Summer I, Summer II) *Please note: Check your Housing Contract for restrictions and eligibility.

The deadline to submit a written request for contract cancellation is July 15th.
The deadline to request Housing Policy Exemption Requests for the Academic Year is August 1st.
The deadline to request Housing Policy Exemption Requests for Spring Semester is December 15th.

I am requesting Exemption / Contract Cancellation for the following reason(s): (You only have to meet one of the criteria)

- | | |
|---|---|
| <input type="checkbox"/> Not enrolling for classes at ASU | <input type="checkbox"/> 21 years of age or older prior to the start of the academic year |
| <input type="checkbox"/> Graduating May/August | <input type="checkbox"/> 60+ earned credit hours prior to the start of the academic year |
| <input type="checkbox"/> Enrolling for less than 12 hours | <input type="checkbox"/> Lived in ASU University-owned housing for 4+ continuous long semesters |

Categories listed below require that you complete and submit an EXEMPTION PACKET including the requested additional/supporting documentation by the appropriate deadline. (see above.)

- ☐ Residing with parents, grandparents, or sibling at their **full-time, established residence** while enrolled at ASU.
- ☐ Marriage
- ☐ Financial hardship directly related to living in the residence halls.
- ☐ Medical condition directly related to living in the residence halls.
- ☐ 6 months active duty military service.
- ☐ Special Circumstances: General or Transfer Student: _____

I understand and acknowledge the following provisions related to my Housing Policy / Contract cancellation request:

- 1. Submission of this request DOES NOT guarantee approval of my request for exemption or contract release.** The information provided will be verified and evaluated. **Off-campus housing arrangements should not be made until I have received WRITTEN notice of release from the office of Housing & Residential Programs.**
- 2. Under the terms of the Housing Contractual Agreement, I may be subject to fees, fines or liquidated damage charges associated with early contract cancellation.** (please see your Housing Contractual Agreement for details).
- 3. If the contract release is approved and I am a current residential student, I must schedule a check out time with my RA or Area Coordinator and properly check out of my room and return all keys issued within the stated check-out deadline.** Failure to complete this procedure could result in additional charges being assessed.
- 4. The University is not obligated to provide housing to me if my request is approved.**

Student Signature

Today's Date

For Office Use Only.

DOB/Age: _____ / _____

Hours Earned/Currently Enrolled: _____ / _____

Number of Semesters on Campus: _____

Student Status: _____ Room Assgn. _____

Date received: _____ **Received by:** _____

Application on File: No / Yes

SOAHOLD: _____ THD: _____

Request: Approved / Denied

Authorized Signature

Date

*The information you have supplied on this form is maintained by the University.
You have the right to review and correct this information by contacting the office of Housing & Residential Programs.*