



*Central Connecticut State University*  
*Department of Residence Life*



**RESIDENCE HALL CANCELLATION FORM**

To be used if you have not moved into your assigned Residence Hall and Room

Name \_\_\_\_\_  
(Last) (First)

Student ID \_\_\_\_\_ Residence Hall \_\_\_\_\_

Room # \_\_\_\_\_ (If known)

Reason for cancellation (check one):

- Commuting
- Off campus apartment
- Withdrawal from school
- Financial reasons
- Student Conduct
- Other \_\_\_\_\_

Remain on Meal Plan: \_\_\_\_\_ Yes \_\_\_\_\_ No

**Housing Cancellation Fee:**

**PLEASE BE AWARE OF THE FOLLOWING CANCELLATION INFORMATION:**

- Upon withdrawal from a residence hall 15 to 28 days prior to and including the first day of classes, a 10% housing cancellation fee based upon the housing fee after deducting the housing deposit will be assessed.
- Upon withdrawal from a residence hall 1 to 14 days prior to and including the first day of classes, a 20% housing cancellation fee based upon the housing fee after deducting the housing deposit will be assessed.

I have read and understand the policies above and wish to cancel my housing assignment.

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use Only:

Processed by/Date Processed: \_\_\_\_\_