



5 Heritage Center · Salt Lake City · Utah · 84112-2036

## Housing Contract Appeal

Please review and fully complete this form. More information on cancelling your contract can be found at <https://housing.utah.edu/moving-in-out/moving-out/>. Contract appeals are heard on a weekly basis and you will be notified of the decision via your UMail account. To request a meal plan accomodation, please go to <https://housing.utah.edu/dining/> to fill out the accomodation request form.

**ALL RELEASES ARE CONDITIONAL** you are responsible for full payment of rents, fees and charges on your account, as well as compliance with any conditions specified by Housing & Residential Education, as outlined in the letter of notification. Students should keep their account current while waiting for the outcome of this request. Any student failing to comply with the conditions of release will be subject to full enforcement of the agreement, including referral to a collection agency or legal action as required.

Student Name: \_\_\_\_\_

uNID (Student ID #): \_\_\_\_\_

Building Name/Number: \_\_\_\_\_

Room #: \_\_\_\_\_

I am requesting:

**Residence Hall and Academic Year Apartment Residents**

- Waiver of contract cancellation fee
- Request accommodation for the meal plan only

**Downtown Commons Graduate Housing**

- Request waiver of requirement to provide 30 day notice
- Requesting waiver of cancellation fee due to not fulfilling 10 month requirement

**All decision letters will be sent to the student's UMail address.**

Where will you be residing:  With parent(s)       Other family member(s)       Off-campus apartment  
 Other (please specify): \_\_\_\_\_

**Please submit all supporting documentation and explanation for your appeal and/or accommodation request along with this form to the Housing & Residential Education office in 822 Benchmark. You may also scan and send via email to [contractappeals@housing.utah.edu](mailto:contractappeals@housing.utah.edu) or via fax to 801-585-3591.**

I, the undersigned, have read and understand all of the above information and requirements in regards to presenting my Contract Termination Request to HRE.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*Effective date is the date received by a Housing & Residential Education (HRE) employee. HRE must receive appeal requests within 30 days of move out/cancellation.

\*Appeals must be completed by the student. Family members may only add supporting documentation.

# Housing Contract Release/Appeal Instructions

## Contract Appeal Instructions

- 1. Review the provisions of the Contractual Agreement** (see excerpt from contract below) regarding releasing a student from obligations of the contract.

13. Appeal: Student may challenge HRE's determination concerning an early termination of this agreement by submitting a Housing Contract Appeal and Meal Plan Accommodation form within 30 days of the date that the student has vacated their room. To succeed on appeal, Student must satisfy one of the specified reasons stated on the appeal form. The form is available on the Housing & Residential Education website.
- 2. Submit your signed appeal to the Housing & Residential Education office.** Please submit the Housing Contract Appeal and Meal Plan Accommodation Form, all supporting documentation and letter of explanation for your appeal and/or accommodation request to the Housing & Residential Education office in 822 Benchmark. You may also scan and send via email to [info@housing.utah.edu](mailto:info@housing.utah.edu) or via fax to 801-585-3591. The form must be signed and completed by the student to be considered.
- 3. All appeals should be accompanied by a letter of explanation/justification.** In addition to the form, students should write a letter of explanation/justification for why they should be considered for a contract appeal or a meal plan accommodation. This will help the committee as they make a decision on the case.
- 4. All appeals should be accompanied by supporting documentation.** Any claim that is made in the letter of justification should have some documented proof. For example, if you say your hours at work were cut, you should provide paycheck stubs that back up that claim. If you say your doctor suggests you move out of the halls due to a medical condition, you should submit a corresponding letter.
- 5. Contract appeal outcomes will be emailed to the student's U Mail account.**

## Medical Appeals

In your letter of justification, please detail why feel you should not be subject to the contract cancellation fee due to the medical condition you have. Further, we would like you to provide a note from your doctor on their letterhead that contains the following:

- Diagnosis
- Date diagnosed
- Rationale as to why moving off campus would help fulfill the treatment plan

## Moving to University Student Apartments

If you are moving to the University Student Apartments, please forward a letter confirming your move-in date.

## Financial Appeals

In the letter of explanation, the student must detail how their personal finances significantly changed **after** the student took occupancy of their room. Furthermore, they must demonstrate the means they took to rectify the situation through seeking employment, financial aid or other avenues. While the student's financial support system's (parents, guardian, trust, etc.) contributions can reflect one avenue of income, there are several other ways a student can work to continue their education and fulfill their contract with Housing & Residential Education. The appeals committee will utilize the form below, the letter of

justification, and all supporting documentation to make their decision. HRE will utilize PeopleSoft to confirm the validity of financial aid information provided.

**\*Complete this form and submit it along with your Housing Contract Appeal and Meal Plan Accommodation Form, supporting documents and letter of justification.**

**A. Change in Financial Status**

What caused your financial situation to change: \_\_\_\_\_  
\_\_\_\_\_

Date your financial situation changed: \_\_\_\_\_

What caused your financial support system's contributions to change: \_\_\_\_\_  
\_\_\_\_\_

Date your financial support system's contributions changed: \_\_\_\_\_

**B. Current Expenses**

Item	Outstanding Amount	Monthly Payment
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

**C. Sources of Income for the Semester**

Source	Semester Amount
Parents/Family	\$ _____
*Work	\$ _____
Loan	\$ _____
Scholarship	\$ _____
GI Bill	\$ _____
Grants	\$ _____
Other _____	\$ _____

\*If working, name of employer: \_\_\_\_\_ Work Study Position?  Yes  No

Position: \_\_\_\_\_ Hours per Week: \_\_\_\_\_ Rate of Pay: \_\_\_\_\_

**D. Financial Aid Status**

Do you claim yourself as a dependent?  Yes  No

Did you apply for financial aid this academic year?  Yes  No

Total financial aid awarded: \$ \_\_\_\_\_ Work study amount awarded: \$ \_\_\_\_\_

Total financial aid accepted: \$ \_\_\_\_\_ Amount of work study utilized through today: \$ \_\_\_\_\_

Total tuition cost: \$ \_\_\_\_\_ Total amount of financial aid refunded to you: \$ \_\_\_\_\_

