

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/termination/>

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 accommodation, please go to <https://housing.utah.edu/dining/forms/> to fill out the accommodation 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 financial 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. 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.

Please submit all supporting documentation and explanation for your appeal and/or accommodation request along with this form to contractappeals@housing.utah.edu

- 1) **Contract appeals must be submitted by the student and not a parent/guardian**
- 2) **Submit contract cancellation through Housing U Portal before submitting the contract appeal form**
- 3) **Review the provision of the contractual Agreement regarding releasing a student from obligations of the contract. Go to [Housing.utah.edu](https://housing.utah.edu) > Click on Moving In/Moving Out > Moving Out > Terminating your contract > Contract Appeals Process**
- 4) **Submit your appeal form and all supporting documentation to the email address (contractappeals@housing.utah.edu) or your appeal will be returned, requesting the documentation**
- 5) **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. This will help the committee as they make a decision on the case.
- 6) **Contract appeal outcomes will be emailed to the student's U Mail account and alternate email address.**

Student Name: _____

UNID: _____

Alternate Email Address: _____

Phone Number: _____

Which of these circumstance apply to your appeal. Please select from the following:

Health & Safety

Bias/Discrimination

Death of a family member

Financial Reasons (See Information Below)

Medical Reasons (See Information Below)

Marriage

Military deployment

Religious Reasons

Moving to other University of Utah owned housing (See Information Below)

Other: _____

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, should you wish to include additional documentation from a medical provider you may wish to do so. Please note this is not required.

Moving to other University of Utah owned housing

If you are moving to the other University of Utah owned housing (e.g. 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 entered the contract (placed the \$200 reservation deposit) for the room and the date that the change occurred. 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 Financial Aid department records to confirm the validity of financial aid information provided. Please fill out the following information:

A. Current Expenses

Item Outstanding Amount Monthly Payment

_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

B. Sources of Income for the Semester

Source Semester Amount

Parents/Family \$ _____

*Work \$ _____

Loan \$ _____

Scholarship \$ _____

GI Bill \$ _____

Grants \$ _____

Other \$ _____

Work Study Position? Yes No

*Position: _____

Did your position change? Yes No

*Hours per Week: _____

Were your hours reduced? Yes No

If yes, list number of hours reduced: _____

*Rate of Pay: _____

Was your pay reduced? Yes No

If yes, list amount reduced by: _____

C. 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: \$ _____