

# Contract Release

Name \_\_\_\_\_ Student A# \_\_\_\_\_

Present Room \_\_\_\_\_ Phone/Cell \_\_\_\_\_

Residents may seek a Release from Contract by completing and submitting this form. **Please be advised that if your request is not approved and you check out of your unit, your check-out will be deemed a Contract Break and the resulting fees will be charged to your Student Account.**

Releases typically are granted for the reasons listed below. Please check the appropriate box and include additional information about why you are seeking a Release from Contract.

- ☐ Academic Internship, Individual Learning Contract (ILC), or Study Abroad which requires the resident to live outside Thurston County for a period of 30 consecutive days or more during an academic quarter. Please take this form to your **Faculty member** to be signed and returned to the Residential and Dining Services Office with a copy of your Internship/Individual Learning Contract seven (7) days before you intend to check out.

Faculty Signature \_\_\_\_\_ Date \_\_\_\_\_

- ☐ Change of academic status (check one)
- ☐ Graduation
  - ☐ Academic Withdrawal
  - ☐ Academic Leave of Absence

Please take this form to **Registration and Records** to be signed and returned to the Residential and Dining Services Office seven (7) days before you intend to check out.

Registration and Records \_\_\_\_\_ Date \_\_\_\_\_

- ☐ Medical Release requires a licensed physician's statement on office letterhead explaining why the medical condition requires you to be released from your Contract. Residential and Dining Services requires thirty (30) days from receipt of your physicians(s) letter to work to accommodate your specific medical needs.
- ☐ Moving to Parent/Guardian residence or Other: \_\_\_\_\_.

**Completing this form does not complete the checkout process.** Please review your housing contract carefully (available online) for additional important information to consider, including billing and refund information for contract releases.

If a contract release is approved, the resident will be billed for the number of days the room was occupied prior to check out, with the following limitations. If the resident checks out within 30 days of the end of the academic quarter, they are obligated to pay rent for the entire quarter. If the resident checks out after noon on the last day of the current quarter and before the 30th day of the following quarter, they will be charged a \$300 late check-out fee, in addition to the per diem cost of their Unit.

- ☐ I have a mandatory meal plan I would like to cancel
- ☐ I do not have a meal plan

Resident Signature \_\_\_\_\_ Date \_\_\_\_\_

Tentative Checkout Date \_\_\_\_\_

Authorized _____ Date _____
Intended Checkout Date _____