

## PETITION TO CANCEL RESIDENCE LIFE AND HOUSING CONTRACT

The Department of Residence Life & Housing allows residents who wish to cancel their contract the ability to submit a petition for termination. The petition is reviewed on the 1<sup>st</sup> and the 15<sup>th</sup> of each month and can take up to 30 days for a decision once all documents have been received. Students must complete the steps listed below for consideration.

- 1. Complete all information and checklists provided on this form.
- 2. Provide a clear written statement of why you are petitioning to be released.
- 3. Provide all required documentation as outlined on the following pages.

## **INCOMPLETE PETITIONS WILL NOT BE REVIEWED.**

Petitions can be emailed to housing@uccs.edu or can be submitted to our office in a sealed envelop addressed ATTN: Residence Life and Housing. Our address is La Plata House 4725 Clyde Way Colorado Springs, CO 80918.

## **Petition Checklist and Documentation**

PLEASE		•	NTS FOR SUPPORTING DO	OCUMENTATION.	
Student Information:	INCOMPLETE	<u>FEITHORS W</u>	ILL NOT BE REVIEWED.		
First Name	Last Name:		Student II	D	
Building	Room #:	Bed#:	Cell/Phone		
_	n your housing contract,	-			
	·				
	. ,			TITION AFTER OCCUPANCY	,
supporting document within 30 days if the 0	ne box next to the categor ation and check off each a Committee requests addit	ry for which yo applicable doc ional docume	ument you have supplied. ntation. <b>Documentation</b> n	Read the requirements for Decisions may not be finaliz nust be clearly scanned in Plact social-security numbers.	
Contract. If this petition assessed based on cond	n is approved, I forfeit ret dition of the room at chec	turn of my sec ck-out. Approp	urity deposit; damage an	der the terms set in the Hous d additional charges may be ed to student's UCCS accoun	
Student Signature			Date		
FOR OFFICE USE ONLY	<b>/</b> :				
Date Received	Date Decision I	Finalized		Granted Deni	ed

## **ATTENTION STUDENTS:**

Please be aware that you have signed <u>a legal and binding academic year contract</u> (fall and spring semesters). Residence Life & Housing offers this petition for consideration of extreme circumstances and makes no guarantees that meeting any of the conditions outlined in this document will release you from your contractual obligation. *Petitions for contract termination are evaluated based upon a change in status which has occurred since the beginning of the contract period*.

I request to be released from my Residence Life & Housing agreement beginning (date):
and have submitted documentation in support of the following reason(s): Select Reason
Marriage/Domestic Partnership
Student must provide a certificate of marriage or legal domestic partnership
Educational Requirement
Subject to verification, provide documentation to show you are studying abroad or in a student exchange program.
Financial Hardship
Students must complete the entire checklist for consideration. A student may qualify for release based on financial hardship if there has been a significant change since the date of the housing contract was signed. Reasons may include, but are not limited to, loss of income due to job loss or reassignment, death, added debt due to substantial medical conditions, etc. Please do not email sensitive information such as tax returns listing social security numbers or other personally identifiable information. You should always redact social security numbers.
Financial Petition Checklist:
You MUST email housing@uccs.edu to set up a meeting to discuss possible housing options
Name of staff member:
You MUST meet with a member of financial aid to discuss your financial options
Name of staff member:
Have you completed the Free Application for Federal Student Aid (FAFSA)? YES NO
Prior to submitting a financial hardship petition, the committee recommends that you have
completed a FAFSA for the current academic year online at <a href="www.fafsa.gov">www.fafsa.gov</a> . Should you choose not to complete the FAFSA, the committee will make a decision based upon the information available at the time the petition is submitted.
Required Documentation:
A personal statement detailing the change in financial situation, completed by the student
A complete copy of your UCCS Financial Aid package
Documentation to support the claim that financial aid is not available to supplement lost income
Documentation to support the claim that moving off-campus will offset the financial burden
Letter of termination or reduction in hours from employer; Indicate if you received unemployment
benefits or a severance from your employer (as applicable)
Pay stubs showing reduction of income or hours; provide at least 2 months
An original Death Certificate (as applicable)
Other (as applicable)

Medical Reasons
All of the following criteria must be addressed in the documentation required to support your petition. <b>Medical</b>
petitions will not be reviewed until appropriate documentation has been received. In addition to providing this
documentation, we recommend signing a Housing Petition Records Release allowing a UCCS provider to contact your documenting provider with any additional questions.
your documenting provider with any additional questions.
Required Documentation:
Provide a personal statement that addresses your rationale for submitting this petition.
Explain how living on campus increases symptoms or adversely affects proper treatment of the condition.
Address what steps have you taken to improve your condition prior to submitting this petition.
If unable to make accommodations on campus, explain the treatment plan and how living off campus will enhance this treatment plan.
Official DSM or ICD diagnosis code related to your adverse symptoms or condition.
Must be submitted from a licensed medical provider that is not an immediate family member.
Documentation must be on official office letterhead with the medical provider's official signature and date of visit.
Documentation MUST explain how living in Housing increases symptoms or adversely affects proper treatment of the condition.
Housing Petition Records Release
Housing Petition Records Release
By signing below, I, give permission for a healthcare provider in the UCCS
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