



**VIRGINIA STATE UNIVERSITY
DEPARTMENT OF RESIDENCE LIFE
RESIDENCE HALL &
FOOD SERVICE AGREEMENT CANCELLATION**

I, _____ am requesting permission to be released from the Housing and Food Service Agreement.

I understand that the account charges will NOT be prorated or removed from my student account until all my personal belongings have been removed, an Exit Form has been completed and a room key has been turned in to the Residence Educator.

I also realize that I forfeit my housing deposit of \$150.00 by signing this document.

Reason for cancellation:

Name: _____

V Number: _____ **Room Number:** _____

Residence Hall: _____ **Semester:** _____

Signature Date

FOR OFFICIAL USE ONLY	
<p>Director's Reply</p> <p>Cancellation</p> <p>Approved: _____</p> <p>Disapproved: _____</p> <p>Deposit</p> <p>Refund: _____</p> <p>Forfeiture: _____</p>	<p>Housing Coordinators</p> <p>_____ SIS+ _____ Notebook</p> <p>_____ Deposit _____ Recon Spreadsheet</p> <p>_____ Update Max Capacity</p>