

Illinois State University University Housing Services

Contract Cancellation Fee Appeal (Formal request to appeal cancellation charges from University Housing)

A Contract Cancellation Fee Appeal is a formal written request to appeal contract cancellation charges outlined in the University Housing Contract Terms and Conditions.

“The Contract Cancellation Fee appeal process is for students who experience significant changes in circumstances beyond their control that prevent them from fulfilling the terms of the University Housing Contract and which cannot be resolved within the University Housing system.” (2025-2026 Terms and Conditions, Section III.G.18)

Submitting this form is NOT a guarantee of release from the contract or the cancellation charges. The request will be reviewed and a decision will be sent to the student’s Illinois State Email. If you would like the email to be sent to a personal email address please include it in the form below.

Contract Cancellation Fee Appeal forms must be returned to ISU Housing Services:

Mail: Assignment’s Supervisor University Housing Services Campus Box 2600 Normal, IL 61790-2600	Fax: (309) 438-8866 ATTN: Assignments Supervisor	Email: Housing@IllinoisState.edu ATTN: Assignment’s Supervisor
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Necessary Documentation

If the primary reason for the request to be released is one of the following, the documentation indicated is required:

1. **Medical**: A statement must be obtained from the student's personal physician or the University Health Service indicating the nature of the illness, the severity of the illness, when the illness was diagnosed, etc.
2. **Financial**: Appropriate documentation must be submitted demonstrating how the student's financial situation **has changed since signing the residence hall contract**.
3. **Marriage**: A statement is required outlining the date of the marriage, address after the marriage and enrollment status after marriage. A copy of the marriage certificate must also be submitted.
4. **Other Reasons**: Supporting documentation is helpful in reviewing Contract Release Requests. Students are encouraged to submit supporting documentation whenever possible.

Please complete the form on other side of this page.

Please type or print

Name _____ UID _____

ISU Email Address _____

Personal Email Address _____

Cell Phone Number _____

Release Requested for: _____ Year () First & Second Semesters () Second Semester () Summer

Are you remaining enrolled at ISU: () Yes, high school graduation date: _____(Mo/Yr)
 () No

Below, clearly state the reason for appealing the University Housing contract cancellation fees. If needed you may type your statement on a separate document. Remember, to include supporting documentation that demonstrates a change in circumstances occurred that leads you to appeal charges.

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

The information supplied on and with this request is, to the best of my knowledge, accurate in every detail.

Signature: _____ Date: _____

Attach supporting documentation.