

ACADEMIC YEAR _____

SEMESTER _____

- JUNIOR
- SENIOR
- GRAD.

- MALE
- FEMALE

OFFICE OF RESIDENTIAL SERVICES
LEHIGH UNIVERSITY

PETITION FOR CANCELLATION OF FRATERNITY/SORORITY ROOM CONTRACT

Name _____ Date _____
 First MI Last

Chapter/Room Assignment _____ LIN _____

Cell Phone # _____ E-mail _____

Housing is contracted on an annual basis (fall and spring semesters). **A student who signs a housing contract will be financially liable for the full academic year in all circumstances unless notified in writing to the contrary by the Office of Residential Services.**

If cancellation is approved, the student will be assessed a Contract Cancellation Fee. The amount of the fee will be based on an established fee schedule and the date the petition for release is filed. The fee schedule is as follows:

Signing of contract through May 31	\$100
June 1 through June 30	\$400
July 1 through July 31	\$700
August 1 throughout entire 2017-2018 academic year	\$1,000

HOUSING CHARGES: The student will not be liable for housing charges unless the room has been occupied. If that is the case, a pro-rata refund will be determined based on the date the room is vacated and the key is returned to Residential Services.

I understand the rules and regulations regarding cancellation of my Fraternity/Sorority Housing Contract. I further understand that my contract obligation is not cancelled until I am notified in writing by the Office of Residential Services that my petition has been approved.

Student Signature _____ Date _____

Chapter Leadership Signature _____ Date _____

Residential Services Signature _____ Date _____

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NOTES: