DEPOSIT REFUND REQUEST FORM

PLEASE PRINT FULL LEGAL NAME

_________________________________________________________

FIRST       MIDDLE       LAST

STUDENT ID NUMBER

_________________________________________________________

RESIDENCE HALL       ROOM#       CELL PHONE NUMBER

GOLDMAIL ADDRESS

NOTE: Depending upon date/reason for canceling your housing/resident advantage meal plan contract, a deposit refund may not be applicable. You are responsible for rent/meal plan charges until the end of your contract/lease agreement period of your official check-out date thereafter.

*NOTE: The Housing Deposit less any damages or monies owed to the University (parking fines, library fines, etc.) will be processed from our office 6-8 weeks after the semester ends. The actual money (if applicable) will be sent from the Bursars.

Make sure the University has the correct address (check on Goldlink) or bank account for the deposit to be sent to.

I DO NOT NEED HOUSING FOR (check all that apply)

___ Fall 20___    ___ Spring 20___    or    OTHER __________________________

REASON FOR NOT LIVING ON CAMPUS (MARK ONE)

___ GRADUATE      ___ INTERNSHIP      ___ MARRIAGE      ___ MEDICAL

___ MOVE HOME     ___ TRANSFER       ___ NOT IN SCHOOL  ___ EXCHANGE

___ OFF CAMPUS    ___ STUDENT TEACH  ___ WITHDRAWAL

STUDENT’S SIGNATURE

_________________________________________________________

DATE

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FOR OFFICE USE ONLY:    ___ ROSTER    ___ UNASSIGN    ___ SYMPLICITY

___ FINANCIALS    ___ POST CHARGES    ___ MEMO FOR DAMAGES

COMMENTS

DEPOSIT REFUND REQUES FORM.PUB (KATHY) Revised 02/17/2016

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