

**Application for Release of Housing Agreement  
Housing and Residence Life Office  
Marywood University**

Name \_\_\_\_\_ Date \_\_\_\_\_

Hall/Room \_\_\_\_\_ E-mail \_\_\_\_\_@m.marywood.edu

Phone Number: (     ) \_\_\_\_\_ Requested Effective Date: \_\_\_\_\_

Class Year: \_\_\_\_\_ I Have Met 2-year Residency Requirement:    \_\_\_ YES    \_\_\_ NO

This form provides students with an opportunity to apply for a release from the Housing and Dining Agreement for the 2019-2020 academic year. **Please be aware that submission of an application to be released from the agreement does not guarantee its approval.** Financial Aid packages often change if students live off campus; you are encouraged to contact the Financial Aid Office at (570) 348-6225 for more information.

**IMPORTANT:** Your housing agreement is binding for the academic year unless you meet the criteria for agreement termination, as outlined in the Housing and Dining Agreement.

**I am requesting a release from my housing and dining agreement because:**

\_\_\_ I will no longer be enrolled at Marywood University effective date: \_\_\_\_\_ because I am:

    \_\_\_ Taking a Leave of Absence   \_\_\_ Transferring   \_\_\_ Withdrawing

\_\_\_ I am switching from full-time to part-time status.

\_\_\_ I am graduating!

\_\_\_ I am participating in a study abroad program. *Will be confirmed with Study Abroad Office.*

\_\_\_ I have experienced a financial hardship which is different than was reported on my completed FAFSA form. *Please provide more specific information by attaching a signed document which describes your financial situation. This information will be forwarded to the Financial Aid Office for review.*

\_\_\_ I will be commuting from a parent's or guardian's permanent, primary address, which is within 50 miles of campus. *Please attach a signed letter from the parent or guardian which confirms the address where the student will be living.*

\_\_\_ Other, please specify:

\_\_\_\_\_  
\_\_\_\_\_

*Your electronic submission of this form from your Marywood e-mail account, or a signature, constitutes your verification that all information presented on this form is accurate and complete. If at any time the information presented in this application is found to be inaccurate or misleading, it will result in room and board charges being retroactively reinstated on the student's account.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

For Office Use Only:

**Request Is:**    \_\_\_ Approved    \_\_\_ Denied                    Other: \_\_\_\_\_

**Conditions:**

\_\_\_ Must live at address identified in the request form for the remainder of the academic year, or room and board charges will be applied.

\_\_\_ Release approved as long as student is not enrolled at Marywood University, Scranton campus for the remainder of the academic year, or room and board charges will be applied.

**Director's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_