KENILWORTH TERMINATION OF HOUSING CONTRACT REQUEST FORM
(For Current Contract Holders After Occupancy or Date of Entry)

THIS FORM MUST BE SUBMITTED TO THE UNIVERSITY HOUSING OFFICE DURING REGULAR OFFICE HOURS. The RESIDENT is REQUIRED to schedule an IN-PERSON EXIT INTERVIEW with a University Housing administrator to seek approval to terminate the contract. This can be done by contacting our office at 414-229-4065 or visiting Sandburg C100. (see section F of the contract for termination policies and fees). The University Housing Office is open from 7:45am-4:30pm, Monday-Friday.

Name ____________________________________________ Student ID# __________________________

(Last)   (First)   (M.I.)

Phone Number (____)______-_____________ Room# __________________________

Terminations are not automatic and are made at the discretion of University Housing. Residents are required to apply during office hours for contract termination. The student is responsible for providing proof of special circumstances. Terminations will be processed as an “unapproved reason” according to the contract book until proper proof is received.

I. REASONS FOR TERMINATION (Check all the reasons that apply.)

☐ Graduation;

☐ Withdrawal or transfer (CIRCLE ONE):

Withdrawal means the student is no longer a UWM student. If the student is transferring please attach a copy of admittance to the new school for a reduction in fees.

☐ Assignment to a University-sponsored internship or other program which requires living outside of Milwaukee County; (attach proof and supply details below)

☐ Member of military called to active duty;

☐ Other reasons not listed (Please describe in detail below - the student may also need to complete and submit an exemption request form, if they are subject to the First Year Residency Requirement)

__________________________________________________________________________________________________________________

__________________________________________________________________________________________________________________

II. REQUESTED VACATE DATE: Indicate the specific date that the student will be leaving ______________________________

Fall semester terminations require a vacate date no later than December 31. If the student remains enrolled or re-enroll, they are obligated to pay applicable penalty fees. For more information, please consult the Contract Guide Book. Contract Guide Books can be viewed on the housing website at www.uwm.edu/housing. Failure to vacate by the approved date may be construed by the University Housing Office as continuation of the Contract for the remainder of the Semester and/or the Academic Year.

If the student is concerned about the condition of their room or any damages, consult the pink carbon copy of the Room Condition Report that they received upon move-in. It is the resident’s responsibility to identify any changes and take appropriate action by submitting an online work order at www.fixit.uwm.edu, however this will not excuse the resident from being financially responsible for new damages or cleaning charges.

The resident should complete the Mid-Contract Termination Checklist at http://uwm.edu/housing/policies/mid-contract-termination/termination-checklist/.

If the resident elects to cancel this termination request, they must notify University Housing via email to university-housing@uwm.edu, a minimum of 24 hours prior to the approved vacate date. Please be advised that if plans change and the resident cancels this termination, there is a possibility that they will lose their current room and mailbox. If this form is turned in after hours, please return to the University Housing Office (Sandburg C100) the next working day to schedule your termination exit interview.

The Resident is REQUIRED to schedule an IN-PERSON EXIT INTERVIEW with University Housing to seek approval to terminate the contract.

I understand that I must properly check out with my Resident Assistant, which includes pre-scheduling a checkout meeting, completing a checkout inspection of my room, and returning my key(s). When this is complete, I will receive a copy of my Room Condition Report, which will be my proof of the date I properly vacated my assigned space. Facility inspectors will perform a full room condition inspection prior to subsequent use, which may result in additional damages being assessed. **I understand that under the Contract, I become liable for liquidated damages for voluntarily terminating the Contract.**

Signature __________________________ Date __________________________

Interview Date _______________ Interviewer __________________________

Office Use Only

Approved Vacate Date __________________________