Waivers are for contracted residents participating in a University-recognized, for credit, program (student teaching, co-op, internship, or study abroad) or who will be away from campus due to medical issues or active military duty. Programs must be outside the city of Ames, IA to be exempt from the cancellation penalty.

Cancellation penalties are waived only if your program participation is verified and only during the time you are away from ISU.

Student Information - Please Print Clearly

<table>
<thead>
<tr>
<th>Last Name:</th>
<th>First Name:</th>
<th>ISU ID#:</th>
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2014-2015 Hall / Bldg.:            House:            Room/Apt. #: |
E-mail:            Cell Phone:            Other: |

Program Information

<table>
<thead>
<tr>
<th>Program Name:</th>
<th>Start Date:</th>
<th>Return Date:</th>
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Program Location: ________________________________

Waiver Term

☐ Fall 2014 Semester Only Waiver - I will be gone all or part of fall 2014 and will return to on-campus housing for spring 2015.
  • I understand that I am REQUIRED to return to on-campus housing for the spring 2015 semester to fulfill the remainder of my contract.
  • I can select a spring 2015 assignment in AccessPlus December 4-14, 2014. Beginning December 15, the DOR will assign me using my below preferences.
  • If I decide to cancel for spring 2015, the March 1, 2014 cancellation deadline still applies.
  I will not return to on-campus housing. I am aware that this does not release me from my spring 2015 contract if I remain a student at ISU.
  I will maintain possession of my fall 2014 assignment and pay for the space during my absence.

☐ If I do not select my own return assignment, one will be selected for me using the following preferences:
  Assignment Preferences – Rank the following with 1 being your first choice. Please rank more than one option in case your first choice in unavailable.
  __ Double Room: Barton/Lyon/Freeman, Linden  __ Single Room: Barton/Lyon/Freeman/Linden  __ 1 Bedroom Apt.; Legacy/Maricopa/Walton
  __ Double Room: Birch/Welch/Roberts  __ Single Room: Birch/Welch/Roberts  __ 1 Bedroom Apt.; Legacy/Maricopa/Walton
  __ Double Room: Friley  __ Single Room: Friley  __ Legacy Apt. – 2, 3, 4, or 5 bedroom, private
  __ Double Room: Helser  __ Single Room: Helser  __ Maricopa Apt. – 2, 3, or 4 bedroom, private
  __ Double Room: Larch/Willow  __ Single Room: Oak/Elm  __ Maricopa Apt. – 2, 3, or 4 bedroom, private
  __ Double Room: Maple  __ Single Room: Wallace/Wilson  __ Walton Apt. – 2, 3, or 4 bedroom, private
  __ Double Room: Oak/Elm  __ Single Suite: Buchanan  __ UV 2- bedroom townhouse, shared
  __ Double Room: Wallace/Wilson  __ Triple Room: Anywhere  __ UV 2- bedroom townhouse, family – PET
  __ Quad Room: Anywhere  __ SV 2- bedroom FAMILY Apt. – PET

Specific Assignment / Roommate Preference: ________________________________

☐ Spring 2015 Semester Only Waiver - I have lived / will live on-campus fall 2014 and will be gone all or part of spring 2015.
  • In addition to submitting this Waiver form, I must also cancel my Housing Contract in AccessPlus.
  • To return to on-campus housing for 2015-2016, I can submit a contract in AccessPlus beginning December 4-14, 2014.
  o I will then participate in the Recontracting process in January/February 2015 to select my own assignment.
  o On March 1, 2015, if I have not selected an assignment, the DOR will cancel my contract so that I can avoid the cancellation penalty.

☐ Both Fall 2014 and Spring 2015 Waiver - I will be gone both fall 2014 and spring 2015.
  • In addition to submitting this Waiver form, I must also cancel my Housing Contract in AccessPlus.
  • To return to on-campus housing for 2015-2016, I can submit a contract in AccessPlus beginning December 4-14, 2014.
  o I will then participate in the Recontracting process in February 2015 to select my own assignment.
  o On March 1, 2015, if I have not selected an assignment, the DOR will cancel my contract so that I can avoid the cancellation penalty.

Statement of Agreement

• By signing and submitting this form, I am stating that I have read and understand the information on this form and in the 2014-2015 Housing Contract Terms and Conditions (http://housing.iastate.edu/data/forms).

• I understand that I am responsible for the accuracy of the information provided on both this form. Inaccurate or false information may result in penalties including, but not limited to, the 80% penalty, forfeiture of my prepayment, and additional rent charges.

Student Signature: ___________________________ Date: ____________

Please return your COMPLETED Contract Waiver Form to: Department of Residence Mail: 2419 Friley Hall, Ames, IA 50012 Phone: 515-294-2900 E-mail: housing@iastate.edu

Fax: 515-294-0623

Housing and Dining Services

Iowa State University

Department of Residence (DOR)

2014-2015 On-Campus Housing and Dining Contract Waiver Form

Revised: June 2013

Please return your COMPLETED Contract Waiver Form to: Department of Residence Mail: 2419 Friley Hall, Ames, IA 50012 Phone: 515-294-2900 E-mail: housing@iastate.edu

Fax: 515-294-0623