

Any student interested in being released from their Residence Hall contract must complete and submit the following information for review.

Student's Information:

Last Name: _____ First Name: _____

Student ID#: _____ Contact Phone #: _____

Semester: _____ Room & Hall: _____

Contract Release Process:

Release from the Residence Halls Contract is not guaranteed for any reason and all releases are at the discretion of the Director of UM Housing. Please review this Release Request Form in its entirety for release guidelines, policy, and procedure. Requests will not be reviewed unless all necessary documentation is attached.

The student must submit the following:

- Completed Residence Halls Contract Release Request Form.
- Letter from student explaining why they should be released from the Residence Halls Contract.
- If the student has earned less than 30 college credits and is under the age of 20, a signature or a letter from the student's parent(s) or legal guardian(s) supporting the student's request to be released from the Residence Halls Contract must also be submitted **in addition** to the letter from the student.
- Any additional documentation supporting the student's request.

Release request materials may be submitted to one of the following:

By Email:
housing@mso.umt.edu

By Fax:
(406) 243-2344

By Mail or In Person:
UM Housing Office
101 Turner Hall
Missoula, MT 59812

Residency Policy:

The State of Montana Board of Regents of Higher Education has a residency policy that requires all students with less than 30 earned college credits reside in the Residence Halls unless this requirement has been waived by the specific university. At the University of Montana, exceptions to this policy are determined on a case by case basis by the Director of UM Housing. If you have earned less than 30 college credits (high school AP credits do not count), please submit the Freshman Residency Release Request Form instead of the Residence Halls Contract Release Request Form.

Reason for Request:

- Medical** - Supporting documentation must be provided from Disability Services for Students.
- Live with Family Member** - Please provide signed statement from the family member.
- Unforeseen Financial Hardship** - Please provide documentation supporting hardship.
- Live in Greek Housing** - Please include house name: _____
- Other:** _____

By submitting this request form and supporting documentation, I agree that the information provided is true and accurate to the best of my knowledge. Submission of false information could result in disciplinary action by the University of Montana and denial of residency policy release. I understand release is not a guarantee. If denied, I understand I will continue to be charged for room and board through the period of the contract. I understand cancellation fees may apply if release request is approved.

Student's Signature: _____ Date: _____

Office Use Only

Received: _____ Age: _____ Hometown: _____ Conduct: Y / N Transfer: Y / N

Credits Enrolled: _____ Credits Earned: _____ GPA: _____ Academic Status: _____

Approved Denied - Reason: _____

Cancellation Fees: _____ Notified: _____