

NOTICE TO VACATE EARLY

**STUDENT
HOUSING**

Selkirk  College

Last Name:	First Name:	Initial:
Student ID Number:	Room Number:	Student Housing: <input type="checkbox"/> Tenth Street <input type="checkbox"/> Kekuli House
Date of Student Housing Termination (Requested move out date):		Date (Confirmed by Office):

Reason for move out:

- Within Policy
- Medical Reasons (Requires copy from Medical Professional stating reasons for withdraw)
- Withdrew from course; (need copy of withdraw statement from Admissions)
- Room-mate issues
- Other (please state reasons) _____
- Selkirk College terminated Student Housing Agreement

Office Use Only:

Calculation of refund if applicable after physical inspection.

1. Refund Amount
2. Cancellation fee of \$100.00 (for all spaces cancelled) **\$100.00**
- 3. Total Student Housing fees charged** **A: \$** _____
4. Damage to the room \$ _____
5. Cleaning fees (attach inspection form) \$ _____
- 6. Total Cleaning and/or Damage fees** **B: \$** _____

AMOUNT OF REFUND: _____

Date: _____ Initial: _____

Kekuli House Residence
301 Frank Beinder Way
Castlegar, BC V1N 4L3
Phone: (250) 365-1227
Fax: (250) 365-1316