

Appeal Form

Date: _____

Name: _____

Student ID#: M00_____

Current Mailing Address:

Street 1: _____

Street 2: _____

City: _____

State & Zip: _____

Phone Number: (____) - _____ - _____

Email address: _____

Appeal Term:

- Fall 20____
 Winter Intersession 20____
 Spring 20____
 Summer Intersession 20____

Refund Appeal for (select all that apply):

- \$200 security deposit
 \$200 application fee
 Housing fees
 Damage charges

Please include a typed letter describing the reason for your appeal, as well as any supporting documentation. **The appeal must be submitted by the date indicated on your notice.** All appeals for damage charges listed on the Room Condition Report (RCR) must include a detailed explanation as to why the damage is being appealed.

Appeals received without proper documentation and appeal form may be denied. Appeals received after the notice deadline will be denied. All decisions by The Housing Refund Appeals Committee are final. All appeals must be submitted in writing to:

Housing Refund Appeals Committee

c/o Housing & Residence Life
1000 E. Henrietta Rd
Rochester, NY 14623
OR

Fax to 585.292.3865 OR Email to residencehalls@monroecc.edu

To the best of my knowledge, all of the information on this form and attachment(s) is complete and accurate.

Student Signature and date

Parent/Guardian Signature and date
(if student is under 18 yrs of age)

PLEASE INCLUDE THIS FORM ALONG WITH ALL DOCUMENTATION