



APARTMENT WAIVER FORM

STUDENT/TENANT NAME:		ADDRESS:	
STUDENT/TENANT ID:		CITY, STATE ZIP:	
CONTACT PHONE #:		EMAIL:	

REQUEST TO WAIVE LATE FEE:

Rent (including utilities) is due on the 1st day of each month. Rent is late if received after the 10th day of the month and a \$100 late fee will be charged. Any reduction or waiver of late fee is at the sole discretion of Carroll College. Please describe request for waiver.

REQUEST TO BE RELEASED FROM LEASE AGREEMENT:

In general, requests should be submitted with a Notice to Vacate Form and any other applicable supporting documentation 30 days in advance.

APARTMENT BLDG/UNIT:	BLDG _____ UNIT _____	LEASE BEGIN DATE:	____/____/____
REQUESTED MOVE OUT DATE:	____/____/____		
REASON FOR REQUEST: (select one)		ADDITIONAL DETAILS:	
<input type="checkbox"/>	Graduation from Carroll College at end of a fall semester		
<input type="checkbox"/>	Participating in a Carroll College-sponsored Study Abroad, National Student Exchange, or placement exchange program for spring semester		
<input type="checkbox"/>	Assignment to student teach, nursing placement or other academic requirement that requires you live more than 60 miles from Helena		
<input type="checkbox"/>	Official withdrawal from Carroll College		
<input type="checkbox"/>	Other (please describe & note that only the four above reasons are specifically provided for in the Lease Agreement. Any refund or rebate of Rent or other relief from the Lease Agreement is at the sole discretion of Carroll College.		

REQUESTED BY: _____ Date _____
 Student/Tenant

APPROVED BY: _____ Date _____
 Residential Life & Housing Representative

_____ Date _____
 Dean of Students & Retention

For Admin Use Only – Instructions for Business Office (i.e. eff dates, any pro-rating needed, effect on remaining roommate(s), etc.)
