



EASTERN OREGON
UNIVERSITY

Residence Life Contract Modification Form

This form is to be used to request a modification of a specific provision of the Eastern Oregon University Residence Life Office Room and Dining Contract. Please fill out this form in its entirety and return it to the Residence Life Office in the Hoke Union Building Rm. 216. It will be reviewed and you will be notified as to the decision regarding your petition.

Name: _____ Student ID: _____

Residence Hall: _____ Room Number: _____

E-mail Address: _____ Cell Phone: _____

1. From what provision of the contract are you requesting a Modification?

2. What are the factors you believe should be taken into consideration in making a decision regarding your request? (Please attach any supporting documentation to this form. If the space is insufficient, feel free to attach a separate page)

I attest that all of the information provided on and in connection with this request is true and accurate to the best of my knowledge.

Signature of Student

Date

For Office Use Only

Reviewed by: _____

Approved: ___ Denied: ___