SPRINGFIELD COLLEGE

OFFICE OF HOUSING & RESIDENCE LIFE DAMAGE APPEAL FORM

(PLEASE PRINT CLEARLY)

Name: _____ SC ID#: _____

Hall Assignment: _____ Room#: _____ Cell Phone: _____

Mailing Address: _____

PLEASE EXPLAIN YOUR REASON FOR APPEALING YOUR DAMAGE CHARGES IN THE SPACE PROVIDED BELOW:

APPEAL PROCESS:

- You are responsible for paying the damage charge assessed to your account by the deadline listed in your damage letter, even if you are submitting an appeal.
- If you appeal is granted, your student account will be credited.
- All appeals must be made in writing; no appeals will be accepted over the phone nor will they be accepted after the appeal deadline listed in damage letter.
- Include any substantiating evidence that supports your appeal with this form.
- If you checked out of your room illegally, you will be unable to appeal any charges placed on your account.
- Please allow at least two weeks for the return of this form with the appeal decision.

Your signature below confirms you have read, understood and agreed to the terms and conditions listed within this document:

Signature: _____ Date: _____

OFFICE OF HOUSING AND RESIDENCE LIFE USE ONLY:

DATE RECEIVED: _____ **APPROVED**: _____ **DENIED**: _____

CREDIT TO BE APPLIED TO STUDENT BILLING ACCOUNT: _____

COMMENTS: