

CALIFORNIA STATE UNIVERSITY, LONG BEACH  
HOUSING & RESIDENTIAL LIFE  
**APPLICATION FOR REFUND OF FEES**

Name \_\_\_\_\_  
Last Name (Please Print) First Name M.I

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Nine Digit Campus I.D. Number \_\_\_\_\_

I hereby request a refund of Housing Fees initially paid by me, less any amounts not refundable as established by State laws and regulations.

My reason for requesting this refund is:

- I never moved into the residence halls.
  - I am withdrawing from CSULB effective \_\_\_\_\_
  - I have requested to vacate the residence halls because \_\_\_\_\_
- \_\_\_\_\_
- Other -- explain \_\_\_\_\_
- \_\_\_\_\_

X \_\_\_\_\_  
Signature of Student Date

**NOTE TO STUDENT:**  
 Your refund check normally takes approximately 60 days from the end of the current month to be processed and will be mailed to your permanent address on file with Enrollment Services. Prior to disbursing the refund check, all outstanding obligations will be deducted.

HOUSING CHARGES DUE: (To be completed by the CSULB Housing & Residential Life Office)

Stay Period: \_\_\_\_\_ To \_\_\_\_\_ Room Type \_\_\_\_\_ Meal P \_\_\_\_\_

<u>DATE</u>	<u>ROOM</u>	<u>BOARD</u>	<u>SOCIAL FEE</u>	<u>INSTALL</u>	<u>CANCEL/OTHER</u>	<u>TOTAL</u>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
TOTAL Charges						_____

General Notes:

Circumstances beyond the control of Licensee: YES \_\_\_\_\_ NO \_\_\_\_\_

Reviewed \_\_\_\_\_ Request Approved \_\_\_\_\_  
Director, Housing & Residential Life