PROCEDURES FOR MEDICAL CANCELLATION REQUEST

Request of cancellation of the Housing contract is a serious matter. This procedure describes the steps that a student needs to take if he or she has an illness (whether physical or mental) or injuries which occurred after the student signed the Housing Agreement where such illness or injury prevents the student from living, on a full-time basis, in a communal setting but has the ability to continue his or her course studies.

If the student needs to withdraw from Housing and his or her classes, the student should contact the Registrar's Office at http://registrar.fiu.edu/index.php?id=83. Note that the Housing Office will follow the recommendation of the Registrar's Office when the student completely withdraws from the University based on a medical condition. The student is still required to complete the standard housing cancellation request form and indicate the reason as a university withdrawal. The Housing Office will not, however, be honoring any request for cancellation of the Housing Agreement after the semester has ended because the student will have received the full value of the Agreement.

If the student needs a reasonable accommodation for a disability which would allow the student to stay in Housing, the student to follow the steps contained in the Reasonable Accommodation Request which can be found at:www.housing.fiu.edu/Forms/index.html.

**PROCESS.** If a student feels that he or she meets the standard for requesting the Housing agreement cancellation described above, he or she should take **ALL** of the steps below. It is the student’s responsibility to provide supporting documentation. **If the student fails to complete any steps or provides incomplete information, the cancellation request will be denied.**

1. Complete both the 1) Housing Contract Cancellation Request and the 2) Medical Request for Release form.
   
   1) The Housing Contract Cancellation request form should be sent to the Assignments Program Assistant in the Housing Office room 121 University Towers.

   2) The Medical Cancellation Request form along with all necessary documentation described in the form should be completed and sent to the Attention: Request for Housing Cancellation Based on a Medical Withdrawal The University Medical Director Florida International University, University Health Services (UHS) Modesto A. Maidique Campus, USHC Room 280, 11200 SW 8th Street Miami, Florida 33199. Contract form
The UHS office will keep the student’s information confidential and will not share it with the Housing Office. The UHS office will evaluate the information provided, will assess whether the student’s condition prevents him or her from living on a full-time basis in a communal setting but has the ability to continue his or her course studies, and will make a recommendation to Housing as to whether the cancellation request should be granted, conditionally approved, or denied. In making the evaluation, the student authorizes the UHS office to consult with his or her health care providers and the Counseling and Psychological Services (CAPS) and/or Disability Resource Center (DRC) as appropriate. In making the evaluation, the UHS office refers the student to the Disability Resource Center (DRC) DRC and/or CAPS as appropriate.

Provided that the student and/or student’s health care provider has given the UHS office sufficient information to make the evaluation, this assessment may take up to ten (10) business days. If more time is needed to make the evaluation, the UHS office will advise the student via the student’s campus email address. Once the Housing office has the UHS recommendation, the Director of Housing or designee will review the student’s file and make a determination. The determination will be communicated to the student via campus email within five (5) business days following receipt of the UHS or CAPS recommendation. There is no appeal from the Housing Office’s decision regarding the cancellation request.

**Note** that this process should not be used because the student is unhappy about his or her roommate(s) or room assignment. It is important that the student provides complete and accurate information. Any evidence of fraud or misrepresentation in this process will result in the automatic recommendation for a denial and that the Housing office will inform the Office of Student Conduct and Conflict Resolution for appropriate action.

**POSSIBLE DECISIONS BY THE HOUSING OFFICE AFTER THE EVALUATION OF THE MEDICAL CANCELLATION REQUEST.**

The Housing Office will take one of the following actions upon receipt of the evaluation of the medical cancellation request by the UHS office:

1. **APPROVAL OF THE MEDICAL CANCELLATION REQUEST.** The Housing Office may grant the request. If the request for cancellation is approved, the student must move out of the unit by the date included in the approval notice. Additionally, the student will be responsible for paying, at the time of check-out, all Housing-related payments or fees incurred through the move-out date pursuant to the terms and conditions of the Housing Agreement. If the student has signed a contract for the next term and there has been an approval of the medical cancellation request, the student will not be liable for any fees for the next term. The student should review his or her financial aid carefully. If any monies are taken from Housing to repay financial aid, the student’s account will be billed to replace these funds.

2. **CONDITIONAL APPROVAL OF THE MEDICAL CANCELLATION REQUEST.** The Housing Office may grant the request with conditions. Such restrictions include the requirement that a student must provide a letter from his or her health care provider on letterhead
confirming that the student is capable of living in a communal setting on a full-time basis without reservation before being allowed to resume living in housing.

3. **DENIAL OF THE MEDICAL CANCELLATION REQUEST.** The Housing Office may deny the request. If so, the student remains financially obligated under the Housing Agreement.