

**Bridgewater State University
Office of Residence Life & Housing
Resident Withdrawal Form**

I, _____, Banner ID #: _____ am withdrawing from residency at Bridgewater State University, for the following reason(s):

- Graduating Transferring Internship
 Medical Reasons Student Teaching Exchange
 Living Off-Campus Personal Reasons No longer attending BSU
 Other _____

If you will still be enrolled as a BSU student, would you like to keep your meal plan?

- Yes No

By signing this form I realize that I am forfeiting my residency (room) at Bridgewater State University. My withdrawal will be effective on (date): ____/____/____.

NOTE: You must see a RA to sign off on your room inventory and return your key. If you cannot check out with a RA, you can complete an Express Checkout in the Residence Life & Housing Office. If you are withdrawing from the university completely, you must also notify the Academic Achievement Center.

Student Signature: _____ Date _____

Please return this completed form to:

Office of Residence Life and Housing
100 DiNardo Hall
Bridgewater, MA 02325
FAX: 508.531.6179

For Office Use only:

Withdrawal Method:

- In-Person US Mail/Fax E-Mail

Staff Member Signature: _____ Date: _____

Please Time Stamp

Processing Checklist:

- Housing Director
- Meal Plan
- Fees
- Deposit
- CCure