

ROOM DEPOSIT WAIVER
Office of Housing & Residential Life
Radford University

Return this form in person to the Office of Housing & Residential Life, 801 East Main Street, Heth Hall, Room 226, Radford, VA 24142; by mail to PO Box 6897, Radford, VA 24142; by fax to 540-831-6654; and by email to res-life@radford.edu

Please Note: Your expected financial contribution has to be less than half of your cost of attending or you must have a full scholarship.

Students who **do not qualify** for a Room Deposit Waiver will be responsible for paying the room deposit in order to be eligible for on campus housing by the deadline date.

Please print:

Last Name: _____ First Name: _____ MI: _____

Radford University Student ID#: _____

Radford University Email: _____

Student Cell Phone Number: _____

Please circle your Student Classification:

New Freshman Bridge Transfer Currently Enrolled Readmit

Academic Term _____

Academic Year _____

This section to be completed in office:

The student is _____ **eligible** for the room deposit to be waived.

The student is _____ **not eligible** for the room deposit to be waived.

OHRL approval: _____

Date: _____