ROOM DEPOSIT WAIVER
Currently Enrolled Students Only

Please complete and take this form to the Financial Aid Office, ATTN: Karen Hedge, P O Box 6905, 169 Heth Hall, Radford University, Radford, VA 24142.

Please Note: Your expected financial contribution has to be less than half of your cost of attending or if you 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.

Print
Last Name: ______________________ First Name: ______________________ MI: _____

Radford University Student ID#:_________________________________________________

Radford University Email: ______________________________________________________

Student Cell Phone Number: ___________________________________________________

Please circle your Student Classification:

New Freshman   Transfer   Currently Enrolled   Readmit

Academic Term _______    Academic Year _________

This section to be completed by the Office of Financial Aid:

The student is _______eligible for the room deposit to be waived.

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

Financial Aid Officer: _____________________________

Date: ____________________________

Return the completed form with decision to the Office of Housing and Residential Life, Attn: Housing Assignments Coordinator, P O Box 6897, Heth Hall, Room 226, Radford University, Radford, VA 24142.

Radford University  Office of Housing and Residential Life
1-540-831-5375  res-life@radford.edu