SUMMER OPTION HOUSING AGREEMENT RENEWAL FORM

Please ensure that your classes are available prior to signing up for summer housing

ID# ___________________________________________________________________________ SUMMER 20 ______________
NAME ___________________________________________________________________________ GENDER: (CIRCLE ONE) M F
LAST FIRST MI ____________________________________________________________________
FACILITY ADDRESS_______________________________TELEPHONE____________________E-MAIL_____________________________
BUILDING/ROOM# __________________________________________________________________

By completing the Summer Agreement Addendum, I acknowledge that this document supersedes all other Housing Agreements that I have signed. All terms of the original Agreement remain in effect with the exception of the termination date. The Agreement has been changed to include the selected summer session. The Agreement terminates at the end of the selected summer session.

CIRCLE SESSION(S) YOU ARE ATTENDING

TERM “A” TERM “B” TERM “C”
*A and B = C

SUMMER CANCELLATION POLICIES AND PROCEDURES PRIOR TO OCCUPANCY

<table>
<thead>
<tr>
<th>SESSIONS “A” AND “C”</th>
<th>DEADLINE AND CANCELLATION FEE</th>
<th>DEADLINE AND CANCELLATION FEE</th>
</tr>
</thead>
<tbody>
<tr>
<td>OPTION FORM APPLICANTS</td>
<td>On or before April 15 is $40.00</td>
<td>After April 15 is the entire session’s rent</td>
</tr>
<tr>
<td>NEW APPLICANTS</td>
<td>On or before April 30 is $40.00</td>
<td>After April 30 is the entire session’s rent</td>
</tr>
<tr>
<td>SESSION “B”</td>
<td>DEADLINE AND CANCELLATION FEE</td>
<td>DEADLINE AND CANCELLATION FEE</td>
</tr>
<tr>
<td>ALL APPLICANT</td>
<td>On or before May 31 is $40.00</td>
<td>After May 31 is the entire session’s rent</td>
</tr>
</tbody>
</table>

By signing this Agreement, the applicant hereby contracts for a space in the Florida A&M University Residential Facilities and agrees to pay rent at the rates established by the University, by the dates specified for the contracted term. By signing this agreement, the applicant understands that this contractual agreement may not terminate without the written approval of the Director of Housing or his designee.

Signature __________________________ Date __________________________ Age __________

Parent’s Signature if Applicable __________________________ Date __________________________ Age __________

FOR OFFICE USE ONLY

Summer (Year) __________________________ Residence Hall/Apartment Assignment __________ Staff/Date __________

Revised 03-23-10