

**University of Hawai'i at Manoa  
Student Housing Services**

Frear Hall • 2569 Dole Street • Honolulu, Hawaii 96822-2328  
Telephone: 808 956-8177, Fax: 808 956-5995

Housing Date Stamp
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**HOUSING FINANCIAL APPEAL FORM**

<b>RESIDENT INFORMATION</b> <i>Please print legibly</i>			
Resident Name		UH ID #	Date of Notification Letter/Billing/Action
Current Mailing Address (Street)		City	State     Zip Code
Email Address _____ @hawaii.edu		Current Home Phone:	Cell Phone:
Term/Year: <input type="checkbox"/> Fall ____ <input type="checkbox"/> Spring ____ <input type="checkbox"/> Summer ____ <input type="checkbox"/> Other: Specify _____		Hall:	Room/Apt #

<b>APPEAL INFORMATION</b>		
<b>Reason(s) of Appeal: check all that apply</b>		
<input type="checkbox"/> Financial Hardship	<input type="checkbox"/> Academic Suspension or Dismissal	<input type="checkbox"/> Personal Crisis
<input type="checkbox"/> Non-Attendance	<input type="checkbox"/> Participation in a Study Abroad Program	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Transfer	<input type="checkbox"/> Withdrawal from the University of Hawai'i System (Oahu)	
Specific Item being Appealed: (Examples: Room Rental, Late Fee, Damages, Improper, etc.)	Amount: (if applicable)	Case # or Invoice #: (if applicable)
Support Reason(s) for Appeal: Please be specific; give all details and any new, verifiable information, contact info, etc. <b>Attach documentation such as but not limited to, the original billing, tax forms, pay stubs, W-2 forms, financial aid, medical/doctor's note, attach additional pages as necessary. Please note: lack of supporting documentation may lead to denial of your appeal.</b>		

Resident Signature:	Date:
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<b>FOR OFFICE USE ONLY</b>			
<input type="checkbox"/> Appeal Reviewed Date: _____	<input type="checkbox"/> Reviewed By: _____	<input type="checkbox"/> Decision Letter Sent Date: _____	
Committee Reasoning:		<input type="checkbox"/> CBORD Billing Updated: _____	
		<input type="checkbox"/> Logged: By: _____ Date: _____	
		<input type="checkbox"/> Documents PDF/Filed:	

## Procedures for Housing Financial Appeal

1. **HOUSING APPEAL FORM:** The resident should fill out and submit a "Housing Appeal" form to Student Housing Services. This completed form must be postmarked/date stamped within the following time frame.

CHARGE PERIOD	DEADLINE TO SUBMIT APPEAL FORM
Fall Semester (Including August Interim)	May 31 of the following calendar year
Spring Semester	August 31 of the same calendar year
Summer Terms (Including May Interim)	December 31 of the same calendar year

2. **SUPPORTING DOCUMENTATION:** All appeals should include documentation to support their claim. Students, for example, claiming financial hardship should provide financial documentation, such as tax forms, pay stubs, and/or financial aid information. Appeal forms that do not include supporting documentation will be reviewed and a decision will be made based on the information provided. Appeals lacking necessary documentation to support their claim will be denied. All decisions are final.
3. **PAYMENT:** The person should make payment on the original billing. Adjustments, such as refunds, will be made after the appeal is completed.
4. **The completed "Housing Appeal" form may be submitted to Student Housing Services via:**
  - o Mail: Student Housing Services, Appeals Committee  
Frear Hall  
2569 Dole St.  
Honolulu, Hi 96822
  - o Fax: (808) 956-5995
  - o Email (as an attachment): [shappeal@hawaii.edu](mailto:shappeal@hawaii.edu)
  - o Hand Delivered: Student Housing Services, Main Front Desk, open M-F 8am-4pm
5. **Residents have one level of appeal and the decision is final and binding within the University of Hawaii.**