

# Old Dominion UNIVERSITY

## ROOM DAMAGE APPEAL FORM

TO: Office of Student Housing  
4601 Elkhorn Avenue, Suite 1208  
Norfolk, VA 23508  
FAX 757-683-4283  
1-800-766-0833  
757-683-4283

Name \_\_\_\_\_ UIN \_\_\_\_\_

Permanent Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home/Cell Phone \_\_\_\_\_ In which building/room did you stay? \_\_\_\_\_

I want to request an adjustment to my student account for room damages because:

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NOTE: The Appeals Committee meets bi-weekly and students will receive a written decision immediately thereafter. No appeals will be considered after 45 days from your official check-out date.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

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Recommend Approval \_\_\_\_\_ Recommend Disapproval \_\_\_\_\_

Reason for the decision is as follows:

\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Appeals Committee Chair

Date written decision emailed to student \_\_\_\_\_

Initials of person sending email \_\_\_\_\_