

**FOR OFFICE USE ONLY**

StarRez ID: \_\_\_\_\_  
Received Date: \_\_\_\_\_  
Processed Date: \_\_\_\_\_  
Processed by: \_\_\_\_\_

## CONTRACT EXTENSION REQUEST FORM

Residents who would like to extend their current contract into another term must complete this form. All extension requests will be reviewed by Residence Services and a response (accepted/declined) will be issued via email within 24-72 hours of submission.

### 1. Resident Information

Last Name	First Name
Email	Phone Number

### 2. Contract Extension

I hereby request to extend my contract:

From _____	to	_____
(Enter the name of your current contract)		(Enter the name of the contract you are extending to)

**CONTRACT NAME**

☐ Fall  
☐ Fall & Winter  
☐ 12 Month  
☐ Winter  
☐ Spring & Summer

### 3. Terms & Conditions

- I am aware that this form serves as an Addendum to Schedule C of my Residence Agreement and the new contract length as above stated supersedes the original term contract I was previously confirmed.
- I am aware that my accommodation fees for the extension are non-reversible once the request has been processed.
- I am aware that I may be required to change rooms for my extended contract.
- If applicable, I authorize MacEwan University to use the confirmation deposit I provided to confirm my current space as a confirmation deposit for full duration of my extended stay.

**I understand that by signing and submitting this form, I certify that I have read and agree to the above terms.**

**RESIDENT'S SIGNATURE**
**DATE**

#### DECISION SUMMARY (To be completed by Residence Services Office)

Approved by Residence Services Office? <input type="radio"/> Yes <input type="radio"/> No _____	
Residence Services Office Representative Signature	
Student notified in writing on: _____	StarRez Dates Updated: _____
Amount to be charged: \$ _____	Scanned into Common Drive: Yes or No (circle)
Charges Added: \$ _____	Uploaded to StarRez profile: Yes or No (circle)

**Collection Notice:** The personal information collected through this Contract Extension Request Form is used to determine and verify your eligibility for Residence accommodation and for uses consistent with that purpose. If your application is accepted, this personal information will be used to operate and administer the services provided by Residence Life and for uses consistent with that purpose. This collection is authorized by section 4(a)(b)(c) of the Protection of Privacy Act. For questions about the collection of personal information, contact: Housing Manager, MacEwan Residence, MacEwan University, 11050 104 Ave NW, Edmonton, AB, T5K 2Y9, Telephone 780.497.4500.