

Telephone Activation & Cancellation Form

Date: _____	SJSU ID: _____
Last Name: _____	First Name: _____
Email Address _____	Cell Phone #: _____
Building: _____	Room # _____
	Bedspace # _____

Licensee has requested to:

Telephone Activation: \$9.95 a month (\$20.00 1x Installation fee) _____

Effective _____
3 business days after requested date above

Please Note the following:

Upgrades will be effective within 3 business days following receipt of written request. Licensee will be charged per semester based on license occupancy dates. Upgrades after start of license dates will be pro-rated. Cancellations will be pro-rated per the effective date of the request (3 business days after written request received).

Telephone Activation Cancellation: _____

Effective _____
Immediately as of date requested above

Licensee's Signature

UHS Authorization

Charges to be Assessed or Reversed	RAC Processing
<p>Charges reversed</p> <p>Effective Date above: _____ Amount _____</p>	<p>Amount to be Refunded: _____</p> <p>Date Notified: _____</p> <p>Refund Request Date: _____</p>

ITS Processing

Ticket # _____

Dispatched Date: _____

Completed: Date: _____

ITS Signature: _____

RBC Processing

- | | |
|--------------------------------------------------------------|----------------------------------------------------------------------------------------|
| <input type="checkbox"/> Adjust plan per ITS memo | <input type="checkbox"/> Enter Fee |
| <input type="checkbox"/> Change move out date for plan | <input type="checkbox"/> Forward to RAC after all damages/keys are verified & uploaded |
| <input type="checkbox"/> Delete Spring or Fall plan (circle) | |