



Cal Poly Pomona Foundation, Inc.
3400 Poly Vista, Building 300
Pomona, CA 91768

(909) 869-4242 ph
(909) 869-4155 fx
village@csupomona.edu

Decline Letter

Date: _____

Name: _____

C.P.P. - I.D. # _____

Refund Address: _____

(Optional: C/O _____)

Telephone Number: _____

Please check one of the following:

_____ I would like to be taken off the waiting list.

_____ I would like to decline my space in the Village. Assignment _____

Thank You,

Signature _____