

University of Central Arkansas
Department of Housing and Residence Life
FRESHMAN HOUSING EXEMPTION 2012 – 2013

Exemption desired for: SEMESTER (Fall 2012) (Spring 2013)

****NOTE: IF YOU CURRENTLY LIVE ON CAMPUS, THIS FORM IS NOT REQUIRED.**

Print Full Name: _____

First Name Middle Initial Last Name

Email Address: _____

Alternate Email: _____

***NOTE: All communication will be via email. Please write clearly.**

Student ID Number: _____ Birth Date: _____

Home Telephone: _____ Cell Phone: _____

ALL freshmen are required to live on campus unless they meet one of the following criteria.

Freshman Exemption Reasons (check the one that applies to you).

- Will be/Currently enrolled in less than 12 hours
- Completed 21 hours
- Lived in a residence hall for two (2) or more semesters
Name of College and Date attended: _____
- Presently 21 years of age or older (attach copy of valid driver's license)
- Living with relatives (parents or legal guardians; grandparents; married brother/sister; aunt or uncle) NOTE: Relative(s) must complete bottom section.*
- Marriage (copy of Marriage Certificate must accompany this form)
- Military Leave (Include attached copy of military orders)
- Not attending the University of Central Arkansas
- OTHER (Please attach a typed letter of explanation addressed to the Exemption Committee)

Student's Signature: _____ Date: _____

EXEMPTION TO LIVE WITH RELATIVE(S)

I understand I may be contacted by the University of Central Arkansas to verify that the above named student will be living in my home.

Relative's Name (Please Print) _____ Day Phone _____ Evening Phone _____

Address where the student will be residing with you, City, State & Zip Code _____

Signature _____ Date _____

For Office Use Only:

Referred to: Exemption Committee Director of Housing Referral Date: _____

Decision: Approved Denied Tabled Other: _____

Committee Chair Signature: _____ Date: _____

Director Signature: _____ Date: _____