FREDONIA
STATE UNIVERSITY OF NEW YORK

Request for EXEMPTION form

College Housing Policy (2 years post high school)

Requestor (Student) Information

Name: Gender: Age: DOB: _____ _____ _____ _____

Student Id#: F Class • Fr. • So. • Jr. • Sr. • Gr. __

Residence Hall: Room #: Cell Phone: ( ) _____ _____ _____ _____

Email Address: @fredonia.edu Home Phone: (_____) _____

Student Status: • Incoming First-Year Student O Incoming Transfer Student O Current First-Year Student

REASON FOR REQUEST (Please check all that apply. Documentation independent of your narrative is required for *asterisked items.)

O Personal /Other • Commuting from Home*
_ • Marriage* _] Financial*

- Attach supporting documentation to this form and return to the Office of Residence Life, Gregory Hall.
- You will receive a response to your request with a brief explanation of the decision. Unless you receive approval of this request, your student status requires compliance with the housing policy.
- Alternative arrangements for housing, including lease commitment, will not be considered sufficient grounds for approval of this request.

Student Signature: Date: _____ _____

Intended off-campus address: If approved, please change your local address via *YourConnection.*

Parent or Guardian Information (must be completed if requestor is under 21 years of age)

I concur with my student's decision to request the permission of the Director of Residence Life for exemption from college housing policy (2 years post high school).

Parent/Guardian Name: Signature: Date: _____ _____ _____

Address : _____
Number & Street City & State Zip Code

OFFICE USE ONLY

Exemption Request • DENIED L APPROVED

Signature of Director of Residence Life Date _____ _____