

Request for EXEMPTION form

College Housing Policy (2 years post high school)

Requestor (Studen	t) Information				
Name:		Gender:	Age:	DOB:	
Student Id#: F		Class Fr	Class Fr. So. Jr. Sr. Gr.		
Residence Hall:		Room #:	Room #: Cell Phone: ()		
Email Address:		@fredonia.edu	@fredonia.edu Home Phone: ()		
Student Status:	Incoming First-Year	Student Incoming 1	Transfer Student	Current First-Year Studer	
REASON FOR REQUE *asterisked items.)	ST (Please check all th	nat apply. Documentation	on independent of y	our narrative is required fo	
Personal /Other Marriage*	Commuting for Financial*	rom Home*			
You will rece approval of tAlternative a	ive a response to you his request, your stud	r request with a brief ex lent status requires com	planation of the dec pliance with the hou	dence Life, Gregory Hall. ision. Unless you receive using policy. e considered sufficient grou	
Student Signature:			Date:		
Intended off-campus	address: If approve	d, please change your lo	cal address via Your	Connection.	
Parent or Guardian	Information (must be	completed if requestor is un	der 21 years of age)		
•	dent's decision to req y (2 years post high so	·	ne Director of Resido	ence Life for exemption fro	
Parent/Guardian Name: _		Signature:		Date:	
Address:				<u>-</u>	
	Number & Street	City & State	Zip	Code	
		OFFICE USE ONLY			
Exemption Request	DENIED	APPROVED			
Signature of Director	of Residence Life		Date		