

## REQUEST FOR EXEMPTION FORM

## FRESHMAN HOUSING RESIDENCY REQUIREMENT

NAME	(Last)	(First)	(M.I.)	STUDENT Z NU	MBER	
MAILIN	G ADDRESS					
			(	)		
CITY/ST	ATE/ZIP COD	E		TELEPHONE		
Univers commu are ma who ha duty. E	sity Housing utable radius de for stude ave a depend	. Students res s of the campo nts who are a dent child or s	iding with the us are exempt at least 21 yea students who	eir parent or lega eed from the resi rs of age, studer are US military v	lents are required to live in I guardian within a 30-mile dency requirement. Exemption its who are married, students eterans, returning from a tour eived prior to the start of the	
Please i	ndicate reas	on for request	and provide re	equired document	ation with this form.	
I\	will be at least	21 years of age	by the first day o	of class.		
1	am married. <u>Re</u>	equired docume	ntation: A copy	of marriage certifica	ate.	
1	nave depender	nt children. <u>Requ</u>	uired documenta	ation: birth certifica	te.	
l	am a US militar	ry veteran, retur	ning from a tour	of duty. Required of	documentation: military orders.	
0	ther, please pr	ovide a persona	ا narrative to ex	plain the request an	d any supporting documentation.	
	•	-			<u>u</u> . A notification of the decision wrequired documentation.	vill
Term(s)	you are seek	ing an exempt	ion: Fall 20	Spring 20	Summer 20	
By signi	ing this form	I verify that all	l information g	iven is true and co	orrect.	
STUDENT SIGNATURE				DATE		
PARENT/GUARDIAN SIGNATURE (if student is under 18 years of age)				DATE		
77	77 Glades Roa	nd, Bldg. 46 • B	Soca Raton, FL	33431-0991 • Tel. 5	561.297.2880 • Fax. 561.297.2881	