

WESTERN CAROLINA UNIVERSITY
DEPARTMENT OF RESIDENTIAL LIVING
Residency Exemption Form

Request for: _____
(Semester) (Year)

Name _____ ID# _____
(Last) (First) (Middle)

Campus Address (if applicable) _____ Cell Phone _____

Permanent Address _____ Home Phone _____

(Street or PO Box)

(City, State, and Zip Code)

I am requesting authorization to commute for the following reason:

_____ I am a Distance Learning Student: Enrolled exclusively in an online program.

_____ I am an Extension Student: Enrolled exclusively in extension courses.

_____ I am a Part-time Student: Enrolled in less than 6 total hours in a term.

_____ I am a Non-degree Student: Unless participating in a program that requires campus housing.

_____ I am a Nontraditional Student: Age 21 or older before 8/1 for fall entry or 12/1 for spring entry.

_____ I am a Married Student: A copy of the marriage certificate must be submitted.

_____ I am a Student with a Dependent or some Dependent(s): Documentation (i.e., birth certificate) must be submitted.

_____ I am a Local Student: Living with legal parent/guardian in Jackson or a contiguous county. Letter from parent/guardian must be submitted.

_____ I am a Veteran: Minimum of 18 months active duty. Documentation required (form DD214).

_____ I am a Senior: Students who have earned 90 or more hours toward graduation.

Student Signature _____ Date: _____

Please submit this form along with proper documentations to the Department of Residential Living, 417 Central Drive, Brown 225, Western Carolina University, Cullowhee, NC 28723. If you have questions regarding this form, please contact the Room Assignments Coordinator in the Department of Residential Living at (828) 227-7303.

FOR OFFICE USE ONLY

_____ Approved _____ Not Approved

_____ Letter Sent _____

Date/Initials

Authorization _____