Freshman Housing Exemption Request

All appropriate documentation must be provided prior to review.

Notice of decision will be made via the student’s official UAM email address.

A student who has his/her request denied will have the right to appeal.

Because of unforeseen changes in a student’s circumstances due to illness, other personal reasons, or late acceptance to the university, some petitions are considered after the expressed dates. Please refer to the UAM Freshman Residential Policy for specific information on deadlines and penalties.

An application for exemption from the on-campus housing requirement does not guarantee nor imply that an exemption will be granted. A student should assume that his/her request has not been granted until he/she receives email notification of approval and should not make other living arrangements or enter into a rental or lease agreement with a third party realtor or lessee until such notification. Having already signed a lease with an off-campus landlord will not be considered a valid reason for an exemption.

Each exemption request is reviewed on a case by case basis. The review committee may request that additional information be provided. Request for additional information will be made via the student’s official UAM email address.

Please indicate the initial term for exemption (circle one): Fall / Spring / Summer Year: 20____

Status (circle one): First Year College Student / Transfer Student / Returning Student

High School Name: ________________ High School Graduation Date (mm/yyyy) _____/________

Please select one from the list below and submit the requested documentation as proof of your eligibility to live off-campus while attending the University of Arkansas at Monticello:

Upperclassman:

☐ I have successfully completed at least twenty-four (24) hours of undergraduate academic credit hours and/or I have enrolled in Graduate School. Note: Transcript may be required if all credit hours cannot be verified with the Office of the Registrar.

☐ I will be twenty-one (21) years of age on or before the first day of classes.

Commuter:

☐ I am living with parents or legal guardians at their primary residence and commuting to campus from within 60 miles of the Monticello Campus.

Documentation: A completed and notarized Parent/Guardian Residence Verification from the parent or guardian verifying that his/her son or daughter will be living at the primary residence.

Exemption Request should be submitted to:
UAM ResLife Department
PO Box 3466,
Monticello AR 71656
Nontraditional Student:

- I am married
  Documentation: A copy of marriage license must be provided.

- I have served in the active military (at least one year)
  Documentation: DD-214 discharge document

- I am a single parent with primary responsibility for supporting and caring for my child(ren).
  Documentation: A copy of the child’s birth certificate and proof of means of support. Such proof may include a copy of your current tax return in which the child is claimed as a dependent or proof of government-sponsored benefits received for your child. Note: Two students may not claim primary responsibility for the same child at two different addresses.

Medical Hardship

- Extreme medical condition and/or disability for which on-campus accommodations cannot be made.
  Documentation: Any student requesting this exemption should contact the Office of Special Student Services located in Harris Hall Room 120; phone 870 460-1026; TDD 870 460-1626; Fax 870 460-1926.

Personal Compelling Circumstance.

- I believe that living on campus would create a situation where extreme personal hardship would exist.
  Documentation: Submit a statement that includes detailed information about the situation and why this request is being submitted to the UAM Housing Office. Include any other documentation that would be pertinent to your request.

I have read and understand the information provided on this form. I verify that the information provided here is true and correct, and I understand that false or misleading information provided by me shall be grounds for disciplinary action against me in accordance with the Code of Student Conduct. I also understand that all information provided is subject to verification and that additional information may be required by the UAM Residence Life Department.

Student Name (Please Print) Date of Birth Student ID Number

Permanent Home Address (Street, City, State & Zip Code)

Official UAM Email Address Telephone Number

Student Signature Date

Office Use only

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<tr>
<th>Request</th>
<th>Approved</th>
<th>Denied</th>
<th>Reviewing Signature</th>
<th>Date</th>
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<tr>
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<td>Appeal</td>
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