

Alfred University
Office of Residence Life
Residency Requirement Waiver

Alfred University is a residential university. We believe that residence hall living is a key component of a student-centered educational experience in which academic learning is integrated with student development. Each student is personally accountable for maintaining a safe and secure environment in his or her residence that promotes a healthy standard of community living. For these reasons, provisions are made to house all students on campus throughout their undergraduate years. Students are required to live on campus for six consecutive semesters to be eligible to live off campus.

Students may petition to the Office of Residence Life for a waiver for the residency requirement for the reasons listed below. Please note all supporting documentation must be attached to this form and forwarded to the Office of Residence Life at least fourteen days prior to the first day of class of the semester for which they waiver is requested. Students who knowingly provide false information will be subject to disciplinary sanctions including assessment of room and board charges for the appropriate semester(s). Students who have not been released from the live on campus requirement will be assessed room and board charges.

Name of Student: _____
Last First MI

Banner ID #: _____

Email Address: _____

Home Address: _____
Street City State Zip

Home Phone: _____ Cell Phone: _____

Semester requesting waiver (please check all that apply): _____ Fall 200__ _____ Spring 201__

Reason for requesting waiver (please check all that are applicable):

- _____ Married or a single parent
- Must submit copy of marriage certificate
- _____ 23 years of age or older
- Date of Birth: _____
- _____ Commuting from permanent home and primary residence of parent or legal guardian
- Must submit a letter signed by parent or legal guardian and your home must be within a 60 mile radius from campus.
- _____ Participating in a co-op or study abroad program
- _____ In need of a medical exemption
- Must submit documentation from medical physician so noting the medical need.
- _____ Appealing the above requirements
- Must submit a letter of explanation as to circumstances
(i.e., Transferred to Alfred University on _____ (date); lived on their campus for _____ (list years).

Signature: _____ Date: _____

Mail to:
Bonnie Dungan,
Associate Director
Office of Residence Life
Alfred University
Alfred, NY 14802
Ofc: 607.871.2186
Fax: 607.871.2237