

**Emmanuel College Office of Student Life
Petition for Residency Exemption**

Student Name: _____ Student ID: _____

Date of Application: ___/___/___ Petition for term beginning: Fall Spring 20___

Date of Birth: _____ Male Female

Anticipated Class Standing next semester: _____

Contact Phone Number: _____

Current On-Campus Housing Assignment: _____, _____
(Residence Hall) (Room #)

Address where you would live: _____
(Street Address) (City) (State, ZIP)

Landlord Name and Contact Number (if applicable): _____

If applicable, with whom will you live? _____

Reason for petition:

Living at Home (Parent/Guardian note required; please attach documentation)

Parent Name: _____ Parent Phone Number: _____

22 years old or older Married Veteran Other (Please explain below):

The information provided above is true, to the best of my knowledge. And, I have read and understand the Residency Requirements stated in the Emmanuel College Residence Life Guide.

Student Signature

Office Use Only:

Date Received: _____ Approved Denied Initials: _____