

SL-702.01.A, Residency Requirement Waiver Supplemental Form

Residency Requirement Policy SL-702.2

All students are required to live in University residence halls. Students who meet at least one of the criteria below may seek a waiver of the residency requirement, through which they can request to live off campus

The following criteria are accepted when seeking a waiver of the residency requirement and requesting to live off campus:

- Lives in primary residence within 45 miles of the Fayette campus for two years prior to enrollment; parents' or guardians' names must be included in the request
- Has completed at least 90 credits
- Is a transfer student to UIU and has completed at least 48 credits
- Married and/or has dependent children
- 22 years of age or older
- Military serving or Veteran

Waivers of the housing residency requirement are available via the Residency Requirement Waiver Form located in myUIU. Those seeking a waiver must do so 30 days prior to the start of Session 1 or Session 3.

Please select the academic year you are applying for:

SAMPLE

I am requesting a waiver of the residency requirement for the following reason(s):

Please select each category that applies:

- Lived in primary residence within 45 miles of the Fayette campus for two years prior to enrollment - please note parents' or guardians' names below
Has completed at least 90 credits
- Is a transfer student and has completed at least 48 credits
- Married and/or has dependent children
- 22 years of age or older
- Military Serving or Veteran

Students who fail to take up residency or move off campus without acceptance of the residency requirement waiver will be assessed a financial penalty of \$3,000.00 per year, and

an 80-commuter meal plan per semester, for the duration of the residency off-campus until they meet one of the criteria above.

Please note that if you are receiving the Peacock Promise Scholarship, you are required to live on campus. Should you still decide to live off-campus, you will lose your Peacock Promise Scholarship and your financial aid will be adjusted accordingly.

Student Name _____

Date _____

Student Signature _____

Waiver request accepted

Waiver request rejected

SAMPLE

Student Life Staff Name _____

Date _____

Student Life Staff Signature _____