

Winthrop University - Division of Student Life - Residence Life

TWO YEAR LIVE ON REQUIREMENT EXEMPTION REQUEST FORM

All newly admitted fulltime first year students, and transfer students entering Winthrop University with less than 24 credit hours, are required to live on campus for their first two years of attendance (4 academic semesters not including the summer term) unless they live within a 50-mile radius with a parent/guardian; are 21 years of age; are married; or a single parent. If you think you are eligible for an exemption, fill out this form and return it for approval to: The Department of Residence Life, 237 DiGiorgio Campus Center, Rock Hill, SC, 29733. Do not assume your request is approved unless you receive an approval from The Department of Residence Life.

Name: \_\_\_\_\_ Permanent Phone \_\_\_\_\_
Last First MI Cell Phone (opt) \_\_\_\_\_
Student ID Number \_\_\_\_\_ E-mail \_\_\_\_\_

I am requesting an exemption from the Winthrop University Two Year Live On Requirement. The specific qualifying factor is:

1. \_\_\_\_\_ I will reside in the principle residence of my parent(s)/guardian within a 50 mile radius of Winthrop University during my first and second full year of enrollment.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

I certify (must be notarized) that the student listed above will be living in my principle residence at the address listed below for the full first and second year of enrollment:

Parent/Guardian Name: \_\_\_\_\_

Address \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Notary Public Certification: State of \_\_\_\_\_ County of \_\_\_\_\_

I, \_\_\_\_\_ a Notary Public for said County and State, do hereby certify that the above named persons personally appeared before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Notary Signature \_\_\_\_\_ My commission expires \_\_\_\_\_

- 2. \_\_\_\_\_ I am married or a single parent student (Please attach documentation)
3. \_\_\_\_\_ I am 21 years of age. List Birth Date \_\_\_\_\_
4. \_\_\_\_\_ I am a military veteran (please attach documentation)
5. \_\_\_\_\_ I am a transfer student with 24 hours (post high school) university credits (Please attach an unofficial transcript)
6. \_\_\_\_\_ Other Compelling Individual Circumstances (Please attach a statement and documentation)

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Failure to comply with the Two Year Live On Requirement and/or providing false or misleading information in connection with a request for exemption is a violation of the Student Conduct Code and may result in cancellation of enrollment and revocation of student status at Winthrop University.

Returning students who fail to submit an exemption request form prior to the contract cancellation deadlines listed below are subject to the associated cancellation fees:

After May 1st through May 31st - \$150
Beginning June 1st through the academic year - \$300

Office Use Only Date Received \_\_\_\_\_ Date of Student Notification \_\_\_\_\_

\_\_\_\_\_ Approved \_\_\_\_\_ Denied

Local Address Verified \_\_\_\_\_ Date \_\_\_\_\_ Initials \_\_\_\_\_ 1/23