

**Section I. Student Information**

\_\_\_\_\_  
Student Name \_\_\_\_\_  
Student ID Number

\_\_\_\_\_  
Date of Application \_\_\_\_\_  
Date of Birth

Application for term beginning:  Spring \_\_\_\_\_  Fall \_\_\_\_\_

Anticipated Class Standing (based on credit hours earned):  
*(Anticipated class standing at the beginning of the semester for which you are applying)*

Freshman     Sophomore     Junior     Senior

(\_\_\_\_\_) \_\_\_\_\_  
Contact Number \_\_\_\_\_  
Current Housing Assignment

**Section II. Off-Campus Housing**

Address of off-campus residence where you will live, if approved:

\_\_\_\_\_  
Street Address City State, Zip

\_\_\_\_\_  
Landlord Name (If Applicable) (\_\_\_\_\_) \_\_\_\_\_  
Landlord Contact Number

\_\_\_\_\_  
If applicable, with whom will you live?

**Section III. Financial Aid Consultation**

*Moving off-campus may affect some students' financial aid. Students must consult with a Financial Aid Counselor regarding off-campus residency.*

\_\_\_\_\_  
Financial Aid Counselor Signature \_\_\_\_\_  
Date

**For Residence Life Office Use Only**

\_\_\_\_\_  
Date Received \_\_\_\_\_  
Received By

**Decision:**  Approved     Denied    **Appeal:**  Granted     Denied    **Staff Initial** \_\_\_\_\_

**Section IV. Reason for Application**

*Check all that apply. Please note that proper verification of documentation may be requested by the College.*

- 1. Student lives and travels to class from primary residence of their parent(s) or legal guardian(s) which is located within a sixty (60) mile driving distance of the Emmanuel College campus. (The College reserves the right to require the submission of the necessary documentation to verify student residency.)
- 2. Student is/will be married at the start of the term for which they are applying. (A copy of Marriage Certificate may be requested.)
- 3. Student is a single parent with primary child-rearing responsibilities. (A copy of official birth certificate(s) for child(ren) may be requested.)
- 4. Student is a veteran. (Documentation may be requested.)
- 5. Student will be twenty-two (22) years of age prior to the first day of classes for the semester for which they are applying.
- 6. Student has earned more than ninety (90) credit hours (senior standing) and will be applying to live in College-owned rental property.
- 7. Student will be twenty-one (21) years of age prior to the first day of classes for the semester for which they are applying and will be applying to live in College-owned rental property.
- 8. Other:

If you **do not** meet any of the above criteria, you must complete this section. If you are claiming medical reasons for residency exemption, please state your medical condition and/or needs in the space below.

*Please note that students applying for **medical needs-based** residency exemption **must** submit an official signed and sealed recommendation from your primary care physician, stating your diagnosis and affirming your need for residency exemption as it relates to your diagnosis.*

Reason for application not listed above:

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**Section V. Student Statement**

*By signing below, I acknowledge that the information provided above is true. I understand that I am responsible for having read and understood the residency requirements stated in the Emmanuel College Student Handbook. I understand that, should this application be denied, I will be required to continue on-campus residency.*

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

\_\_\_\_\_  
Date