



## EASTERN KENTUCKY UNIVERSITY

*Serving Kentuckians Since 1906*

### **Request for Exemption from ECU Housing Residency Requirement or Release from ECU Housing Contract**

The Eastern Kentucky University residency requirement states: “*all single, full-time undergraduate students under 21 years of age, having fewer than 60 credit hours earned or having lived less than 4 academic semesters (fall/spring) in university residence hall facilities are required to live in university residence hall facilities. Exception is made for students residing with their parent(s) in the parent’s principal residence within 50 miles of the Richmond campus, as determined by an official state map. Full time students must be 21, have earned a total of 59 credit hours, or have lived four academic semesters on campus prior to the first day of classes of any given semester to live off campus for that semester. Students failing to meet this requirement will be assessed the lowest residence hall fee.*” University Handbook for Students

#### **INSTRUCTIONS:**

Students wishing to request a release from the university residency requirement, or release from a University Housing contract, may do so by following the steps below:

1. Complete the Request for Exemption from University Housing Residency Requirement/Release of Contract Form.
2. Submit the completed form, letter of request, and required information to the ECU Housing office, Whitlock Bldg CPO 51, 521 Lancaster Avenue, Richmond, KY 40475. Charles D. Whitlock Building Room 552.

**All paperwork and supporting documentation must be received before classes begin. Requests submitted after the commencement of classes, if approved, will see charges reduced according to the University’s refund schedule. EKU’s Colonel Compass lists all deadlines associated with each term.**

#### **CIRCUMSTANCES:**

Students wishing to request a release from the university residency requirement or from university housing contract may do so under the following circumstances:

- **Significant unexpected change in financial situation.** (details on page 3)
- **Documented medical or psychiatric condition.** (details on page 3)
- **Other.** Other reasons that may not fall into one of the areas listed above. Please fully explain the nature of the situation and provide any supporting documentation.

#### **PROCEDURES:**

1. At the time a student submits the form, he/she may request an appointment to meet and discuss his/her request with the appropriate staff member within the department. If no appointment is made, the request will be reviewed based on the written documentation submitted.
2. The staff member will make a decision within five (5) business days after meeting or within five (5) business days following receipt of the documentation and will notify the student via an email to his/her ECU email address. If the student has not received any information within ten (10) business days, it is his/her responsibility to follow up with the Housing office.

**NOTE:** *Cases are decided based on documentation provided. Evidence of deliberate falsification of information or the submission of any materials, which provide false or erroneous information in connection with an attempt to be released from the residency requirement shall be grounds for pursuing disciplinary action.*

**EASTERN KENTUCKY UNIVERSITY**  
**Department of ECU Housing**  
**Request for Exemption from ECU Residency Requirement Form**  
**Or Release from ECU Housing Contract**  
(Please attach to letter of request and supporting documentation)  
YEAR \_\_\_\_\_ FALL \_\_\_\_\_ SPRING \_\_\_\_\_

**Please fill in the following information:**

Student Name	University ID Number
Mailing Address	Phone Number
Cell Phone/Alternate Phone	Classification (Freshman, Sophomore, Junior, Senior)
University E-mail Address	

**Please indicate the action you are requesting:**

\_\_\_\_\_ Request exception to housing residency requirement    **OR**    \_\_\_\_\_ Request release from signed housing contract

**PROPOSED ALTERNATE LIVING ARRANGEMENTS:**

\_\_\_\_\_  
Address of house or name and address of apartment

City	State	Zip
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- **Attach a letter containing a detailed description as to the circumstances regarding your situation, making sure to date and sign the letter.**
- **Attach all other information or supporting documents required.**
- **The more information you provide, the more quickly a final decision can be made. This information may be typed or neatly printed in ink.**
- **All paperwork and supporting documentation must be received before classes begin. Requests submitted after the commencement of classes, if approved, will see charges reduced according to the University's refund schedule. EKU's Colonel Compass lists all deadlines associated with each term.**

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*I verify that all of the information contained in this request is accurate. I acknowledge that evidence of deliberate falsification of information or the submission of any materials, which provide false or erroneous information in connection with an attempt to be released from the residency requirement, shall be grounds for pursuing disciplinary action.*

Student Signature	Date
<b>Office Use ONLY</b>	
E-Mailed _____	

## Circumstances/Procedure Detail

### **A. SIGNIFICANT UNEXPECTED CHANGE IN FINANCIAL SITUATION**

Use this option if you have had an unexpected decrease in financial support or an unexpected increase in expenses. If you are requesting a release from signed housing contract the change in financial situation must have occurred after the contract was signed. Examples of documentation must include:

1. proof that a decrease in financial support or increase in expenses occurred; **and**
2. proof that expenses significantly exceed your ability to pay; **and**
3. proof that the cost of living off campus is significantly less expensive than living on campus.

Copies of termination of employment notice, bankruptcy statement, medical bills, repair bills, and other unexpected major expenses must be provided. If you have been granted a change in financial aid status you must provide supporting documentation from the University's Financial Aid Office. It is expected that students fully utilize all loans available to them. **All financial information submitted to ECU Housing will be used only for the expressed purposes for which it was intended and will not be made available to any third party.**

### **B. DOCUMENTED MEDICAL OR PSYCHIATRIC CONDITION**

Use this option if a medical or psychiatric condition exists for which you are receiving ongoing treatment and which is worsened by conditions associated with living in a ECU Housing facility. You must complete the Medical Information Release Form and submit it with a typewritten letter from an appropriate medical practitioner on his/her office stationery, which clearly outlines the following:

1. What are the specific accommodations needed in order to meet the medical / psychiatric needs of this student.
2. How is the request to live off campus directly related to the student's condition?
3. Is the condition permanent? If so, what is the prognosis for the condition? If temporary, what is the duration?

The letter from your medical practitioner is required: it must address all the items listed above as they pertain to your condition; and it must clearly describe the specific types of living arrangements / needs that would accommodate your medical or psychiatric condition. Your physician may be required to accompany ECU Housing staff in a visit to the residence hall as a means of further detailing the needs that would accommodate your medical or psychiatric condition.

### **C. OTHER**

Other reasons that may not fall into one of the areas listed above. Please fully explain the nature of the situation and provide any supporting documentation.



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**Department of EKU Housing**

**MEDICAL INFORMATION RELEASE FORM**

If requesting a release based on a medical or psychiatric condition, complete this form and return it with the letter from your medical practitioner.

I, \_\_\_\_\_, give the Director (or his/her designee) of EKU Housing at Eastern Kentucky University permission to contact my medical practitioner, whose name, address and phone number are attached. **Permission is restricted to that information required for clarification regarding specific living accommodations needed.**

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student' signature (Parent/Guardian if student is under 18 years of age)

\_\_\_\_\_  
Date

\_\_\_\_\_  
University I.D. Number

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip

EASTERN KENTUCKY UNIVERSITY

EKU HOUSING

Verification of Living with Parents

YEAR \_\_\_\_\_ FALL \_\_\_\_\_ SPRING \_\_\_\_\_

Please note: University policy states that ALL single, full-time, undergraduate students under the age of 21, having fewer than 60 hours, or less than four academic semesters living on campus, are required to live in university residence hall facilities. Exception is made for students residing with their parents in the parents' principle residence within 50 miles of the Richmond Campus as determined by an official state map. Full-time students must be 21 years of age or have completed 59 hours prior to the first day of class of any given semester or lived in campus housing for four academic semesters to live off-campus for that semester. Students living off-campus who fail to meet this requirement will be assessed the lowest residence hall fee.

All paperwork and supporting documentation must be received before classes begin. Requests submitted after the commencement of classes, if approved, will see charges reduced according to the University's refund schedule. EKU's Colonel Compass lists all deadlines associated with each term.

Please keep in mind. Any forms that are incomplete will not be processed.

Return to: Office of Eku Housing

Whitlock bldg CPO 51

521 Lancaster Ave. Richmond, KY 40475

Fax: 859-622-8384

Phone: 859-622-1515

An email will be sent to the Eku email address of the student making the request within 5 working days verifying receipt of the submitted documentation. If the email is not received, the student may contact Housing to confirm receipt and request an email.

I, \_\_\_\_\_, will be living with my parent(s)/ legal guardian, in their permanent principle residence for the entire academic year.) The address is listed below:

Phone	Physical Address (no PO Boxes)	City	Zip
_____	_____	_____	_____
_____	_____	_____	_____

I, \_\_\_\_\_, am the parent/legal guardian of the student listed above. I verify that my son or daughter will be living with me in my permanent, principle residence at the address listed above for the entire academic year.

Parent or Legal Guardian's Signature

The signatures and information of both parties were witnessed set forth here this \_\_\_\_\_ day of \_\_\_\_\_.

COMMONWEALTH OF KENTUCKY, COUNTY OF \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

Notary Public, State At Large

Phone Number

By signing this verification, we understand that:

There is a continuing obligation to report any changes of address to the Eastern Kentucky University Housing Office. A change in status of address may require the student to live in student housing pursuant to the University's housing policies; and Falsification of this affidavit or failure to meet this continuing obligation may result in disciplinary action and being charged the lowest residence hall fee.

This form must be completed before the commencement of Fall semester classes every year until the residency requirement has been met.

Office Use ONLY

CBORD \_\_\_\_\_ E-Mailed \_\_\_\_\_ Address \_\_\_\_\_ HS \_\_\_\_\_  
CSA \_\_\_\_\_ Charge \_\_\_\_\_