

STUDENT INFORMATION:

East Central University Freshman Residence Requirement Exemption Request

All freshman students are required to live on campus unless they meet one or more criteria to be exempt from the Freshman Residence Requirement. This form and all supporting documents may be delivered to the Office of Housing and Residence Life, Administration Building Room 155 or mailed to Housing and Residence Life, 1100 E. 14th Street, PMB R-7, Ada, Oklahoma 74820. **This form will not be accepted after the first ten (10) days of classes during the fall and spring semesters.**

Full Name:		ECU ID #:			
Address:		Phone #:			
Address.		Thone #.			
City/State/Zip:		Email:			
I am requesting a	n exemption from the ECU F	reshman Residence Requirement for the followin	g reason (check one):		
Required doc	cumentation (copy of one of tand income may be blocked of	un(s) full-time in their primary residence within a the following): current utility bill, lease, mortgage out). *This form must be notarized with signature	e, or recent Federal Incom	ne Tax	
I am 21 years ID).	s of age or older. Required do	ocumentation: Proof of age (birth certificate, copy	of passport, or governme	ent issued	
I have other	circumstances. Please choose	one below and provide an explanation if necessar	ry.		
	I am married. Required documentation: Copy of marriage license.				
	I have a dependent who lives with me. Required documentation: Copy of birth certificate(s) or a copy of your Federal Income Tax return showing exemptions claimed for dependent(s) (SSN and income may be blocked out).				
	I have 24+ hours ear	rned post high school. If transfer student copy of u	nofficial transcript(s) req	quired.	
	I have other extreme	circumstances. Please provide explanation and al	ll supporting documents.		
commute to and f notify the Office	my primary residence listed from classes from this address of Housing and Residence Li	, declare that the student named above is my son above as a freshman student at East Central University of the entire academic year. I declare that if this fe and this student will move into the residence hat Date	ersity. I declare that this s s student moves out of my alls within 5 days.	student will y residence, I will	
	at submitting false informat sciplinary action and/or fina	ion to the University is a violation of the Stude ancial penalties.	nt Code of Conduct (Sec	ction IV. B) and	
Student Signature	2	Date			
		Subscribed and sworn before me this	day of	, 20	
		Notary Public:			
STAFF:	DATE:	FOR OFFICE USE ONLY: APPROVED: Y / N REASON:			