NORTHWESTERN STATE UNIVERSITY
A Member of the University of Louisiana System
One Card Office, Rm. 152
Student Union
Natchitoches, LA 71497

APPLICATION FOR OFF-CAMPUS RESIDENCY

NOTE: SIGNING A LEASE AGREEMENT OR PURCHASING A HOME PRIOR TO BEING GRANTED APPROVAL DOES NOT EXEMPT STUDENT FROM HOUSING POLICY. This request must be completed and filed in the One Card Office at least 14 days before the first day of classes for the semester for which exemption is sought.

Name:_____
(last) (first) (middle)

Circle semester(s) for which exemption is requested: Summer Fall Spring 20_____

Student I.D. # (not social security number):_____ Birthdate:_____

Email:_____ Cell Phone:_____

Local Address:_____

Parent or Guardians' Name:_____ Home Phone:_____

Parent or Guardians' Address:_____

Classification (circle): Sr. Jr. So. Fr.

No. of Semesters Lived ON Campus:_____ No. of Semesters Lived OFF Campus:_____

Have you previously applied/been approved to live off campus? Y N Is so, when? _____

Exemption approval does not cancel your lease with University Columns/University Place, you must contact them prior to submitting this exemption to the university.

*****IMPORTANT: PLEASE READ BELOW*****

You **must** attach a signed statement giving your reasons for requesting an exemption to the On-Campus Residence Requirement. Please follow procedure listed on the back prior to submitting your Application for Off Campus Residency. **The undersigned certifies that all information submitted is true and correct; the undersigned fully understands that false or misleading information will subject the student whose signature appears below to a charge equal to room and board payment and to disciplinary action by the university.**

Signature of Student:_____ Date:_____

For Office Use Only:

_____Permanent Exemption; do not need to reapply.

_____Approved through _____ Semester
(**Note expiration date. Must reapply for future exemption.)**

_____Approved to live with _____ only.

_____Denied. **May appeal to Exemption Committee within 10 business days.**

COMMENTS: _____
_____
_____
_____
_____

Action Taken by Committee on 1st Appeal:_____date_____

_____

Action Taken by Committee on 2nd Appeal:_____date_____

_____

Date Received in One Card Office:_____ Date Notification Mailed:_____