



Department of Housing and Residential Education  
 Assignments Office  
 SASB North, CB #5500  
 Chapel Hill, NC 27599-5500  
 (919) 962-5401 Phone  
 (919) 962-1006 Fax

***Request for Waiver of the First Year Campus Residency Requirement  
 University of North Carolina at Chapel Hill***

**Priority Deadline for Consideration is July 1.**

Name (Last, First, M.I.) \_\_\_\_\_ Student PID Number \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_

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

**Anticipated Address, if residency waiver request approved**

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

I am requesting exemption from UNC-Chapel Hill’s housing requirement for first-year students. I understand that I must still submit an online housing application. I have obtained the appropriate signatures verifying the authenticity of my request and have submitted required documentation that supports my qualifying factor(s).

\_\_\_ I am 21 years old prior to the opening day for the residence halls as specified in the academic calendar for the term for which the waiver is requested

\_\_\_ I am living with my spouse and/or children

\_\_\_ I am a military veteran with at least two years of active service

\_\_\_ I am in a same sex domestic partnership

- Must provide a completed “Affidavit of Domestic Partnership”

\_\_\_ I have a medical hardship that requires me to make other living arrangements

- Statement of your situation
- Documentation from a qualified physician on official letterhead indicating a medical problem and how it specifically affects your ability to live in any residence hall on campus, and specifically note how your proposed alternative housing will remedy your medical concern

\_\_\_ I have a financial hardship that requires me to make other living arrangements

- Statement of your situation
- Documentation to support your claim of financial hardship. Examples of this can include: statement from the Office of Financial Aid showing the financial aid you receive and in what amounts, current savings, documentation of changes in job earnings, Social Security, bank loan(s), letter from you and/or parents indicating the amount of contributions being made to your education expenses, verification of FEMA loss, employment termination, etc.
- Notarized statement from a new landlord indicating the total cost of a possible off-campus lease, the period of time for which the lease is in effect, and any utilities or other benefits covered (i.e. electricity, internet, telephone, etc.)

\_\_\_ Other \_\_\_\_\_

Please be sure to include sufficient documentation in support of your request. Send requests and supporting documentation to the following address:

*Housing and Residential Education  
Attn: Assignments Office  
450 Ridge Road, CB #5500  
Chapel Hill, NC 27599-5500*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Notarization**

\_\_\_\_\_ County, North Carolina

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she signed the foregoing document:

\_\_\_\_\_.

*Name(s) of principal(s)*

Date: \_\_\_\_\_

(Official Seal)

\_\_\_\_\_  
*Official Signature of Notary*

\_\_\_\_\_, Notary Public  
*Notary's printed or typed name*

My commission expires: \_\_\_\_\_

Office Use Only

Committee Decision:    Approved       Denied

Reviewed By: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_ Notification Date \_\_\_\_\_

Local Address Approved

\_\_\_\_\_