



SEATTLE UNIVERSITY HOUSING & RESIDENCE LIFE

901 12th Avenue P.O. Box 222000 Seattle, WA 98122-1090 www.seattleu.edu/student/housing
Tel.: (206) 296-6305 Fax: (206) 296-2212 Email: housing@seattleu.edu

Residential Requirement Exemption Request

NOTE: Returning students applying for an exemption are required to submit a request by May 1st. New students are required to submit a request by August 1st.

Students must live with the family member in their primary place of residence. "Family" is defined as a parent, aunt, uncle, grandparent, spouse, or children. "Primary place of residence" is defined as a person's trust, fixed, and permanent home and place of habitation, to the exclusion of all others. It is a place where the person intends to remain permanently.

After moving in, because of the binding Housing Agreement, we will not approve mid-year move outs without a cancellation penalty. Students applying to live with family must complete the Release from Housing Request through the online *MyHousing* portal and submit ALL of the following documents:

1. A photocopy of a valid form of ID from the family member you will be living with.
2. A photocopy of a utility bill from the address that you will be commuting.

Send or email documents to Housing and Residence Life in Campion 100 or Housing@seattleu.edu. This request will not be accepted unless this form is fully completed and the above documents have been received.

Student Name: _____ **SUID#:** _____

SU Email: _____ **Phone Number:** _____

Address (include City, State, Zip): _____

I confirm that the information I provided on this and related documents is true and accurate. I understand that if it is discovered that the information is false I will be referred to the University Integrity Formation proses. I understand that if the information I furnished is false I will be responsible for the cost of housing and meal plan for the academic year.

Student signature: _____ **Date:** _____

I certify that the above information is correct and my student will be residing at the address provided above which is within a commutable distance. For verification of my address, I have attached a photocopy of my Washington Driver's License or State-Issued Identification Card and a utility bill from my residence with this letter.

Family member signature: _____ **Date:** _____

Family member printed name: _____ **Phone Number:** _____

Relationship to student (parent, aunt, uncle, etc): _____

For Office Use Only

Date received	All documents received?	Decision	
	Verbal Confirmation:		
Eligible?		Reviewer initials:	Reviewed date: