

## University of Dubuque Office of Residence Life Housing Exemption Form for 2025-2026

Residence Unit contracts are for the Fall and Spring semesters of the academic year. All full-time undergraduate students having earned **less than 90 academic credits** at the end of the preceding Spring semester or the start of their UD academic career are required to live in University of Dubuque housing units in the upcoming academic year; unless students meet one of the exemption criteria (see Residency Policy) or successfully appeal to the Housing Appeal Committee. If you qualify for one of the exemptions below, **please complete this form in its entirety and provide the requested documentation. If you do not meet one of the exemption criteria and would like to appeal to be exempt from the Housing Residency requirement, please complete the Housing Residency Appeal form.**

**NOTE:** We strongly discourage students from signing an off-campus lease until this process has been completed and you have received written notice that your Residency Exemption Application or Housing Residency Appeal is approved. If done prior to this, you are not released from the requirement to live on campus and remain financially responsible for your assigned UD housing room and board (meal plan).

<b>Student Information</b> <i>(Please Print Clearly):</i>	Today's Date: _____
Name: _____	Student ID #: _____
Cell Phone #: _____ - _____ - _____	
Current housing: _____	
Permanent Home Address: _____	
City: _____ State: _____ Zip: _____	
I am requesting an Exemption from the Residency Policy for the academic term(s):	
<input type="checkbox"/> Fall Semester of 2025 <input type="checkbox"/> Spring Semester of 2026	
Number of Credits Already Earned (start of spring term): _____	
Current Credit Enrollment (spring term): _____	
Total credits earned (end of spring term): _____ (do not complete this form if at or above 90 credits)	

### Residency Policy

The University of Dubuque's Residency Policy states that all full-time undergraduate students having earned **less than 90 academic credits** at the end of the preceding spring semester or the start of their UD academic career are required to live in University of Dubuque housing units for the upcoming academic year. A student who wishes to be considered for an exemption from the Residency Policy must meet one the criteria below and complete this form (**NOTE:** do not complete and submit this form if you do not meet one of the criteria below). This process could take up to 30 days. In order to apply and be considered for an Exemption from the Housing Residency Policy, you must meet one of the following criteria (please check the one that applies) and submit the supporting documentation requested:

- Married and living with spouse
- Living with a child/children or legal dependent(s)
- Living with and commuting daily from the home of an immediate relative (parent, grandparent, or legal guardian) within 50 miles of Dubuque.
- Less than 90 credits, but your number of earned academic credits will be at or above 90 credits at the end of the summer term (through enrolled courses, exam credit, or transfer credit) or at the start of your UD academic career.

Please note that students falling within the terms of the Residency Policy who have not been provided written notification of an approved exemption will be assigned campus housing and held accountable for related room and board (meal plan) costs.

**If your application is APPROVED to be released from the Residency Policy requirement**, you will be required to re-apply each academic year for an exemption until you have reached the 90 credit requirement. Please note that a UD housing contract is for the Fall and Spring academic sessions, and once a contract is signed it is binding for the entire academic year.

*Initial here indicating you understand this paragraph:* \_\_\_\_\_

**If your application is NOT APPROVED to be released from the Residency Policy requirement**, you will be required to pay 100% of your assigned room and board (meal plan) fees.

*Initial here indicating you understand this paragraph:* \_\_\_\_\_

### **Information of spouse for students married and living with spouse (Criteria 1 from list above)**

If you are married and will be living with your spouse, please complete the contact information below. Staff may contact your spouse to confirm your relationship and your intent to reside together. Additionally, **please submit copies of your marriage license and the rental agreement or mortgage of the residence that you plan to reside in; and verification of a piece of mail delivered to both you and your spouse (separately) to that address.**

Name of Spouse: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Telephone number of spouse (including area code): \_\_\_\_\_

### **Information of child/children or legal dependent for students living with child/children or legal dependent (Criteria 2 from list above)**

If you are the parent of a child/children or the guardian of a legal dependent. Please provide their name(s) below and the address in which you will be residing. Additionally, **please provide a copy of birth certificate(s) or legal guardianship for child/children or legal dependent, the rental agreement or mortgage of the residence that you plan to reside in; and verification of a piece of mail delivered to you to that address.**

Name of child/children or legal dependent: \_\_\_\_\_

Name of child/children or legal dependent: \_\_\_\_\_

Name of child/children or legal dependent: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

### **Information of parent, grandparent, or legal guardian for students wanting to commute (Criteria 3 from list above)**

If you are requesting to commute from a parent(s), grandparent(s), or legal guardian's home within 50 miles, you must include their name and contact information. Staff may contact them to confirm your intent to reside at, and commute from their home. Additionally, **please submit a copy of the rental agreement or mortgage of the residence that the family member below resides at and verification of a piece of mail delivered to that address.**

Name: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Telephone number, including area code: \_\_\_\_\_

**Information regarding plan to increase completed credit total to 90 credits  
or more by the start of fall semester  
(Criteria 4 from list above)**

If you will be below 90 completed credits at the end of the spring semester, please identify your plan to have 90 or more completed credits posted to your academic record prior to the start of the fall semester. **Please submit a copy of unofficial transcripts, copy of course registration of summer courses, unofficial transcripts of exam credits, or registration documentation for exam credit.** Note: credit total must be officially posted to your academic record one week prior to the start of fall courses or student will be held responsible for a housing contract for the academic year.

Intent to increase credit total:

Summer courses: \_\_\_\_\_

Exam Credit: \_\_\_\_\_

Transfer of current or previously completed college credit: \_\_\_\_\_

Transfer of previously completed exam credit: \_\_\_\_\_

**Please read the following statements carefully before you sign:**

I am requesting an Exemption from the Residency Policy requiring me to live in UD housing. If this application is approved, I agree to be in compliance with the policy for the reason(s) stated on this form and all content outlined within this document. I have included all necessary documentation to support my application for an Exemption from the Residency Policy.

I am aware that knowingly making a false statement, either orally or in writing, to any University employee concerning a University-related matter is a violation of the UD Student Handbook, and may result in disciplinary action. I understand that if my exemption is approved to commute from the home of my parent(s), grandparent(s), or legal guardian, and I move from that address without written permission from the Office of Student Life, this release would be null and void, and I would then be in violation of the Residency Policy and the University would take appropriate action.

**Meal Plan:** If approved to be Exempt from the Residency Policy, it is my responsibility to contact the Student Accounts office to make any necessary changes to my current meal plan.

**Student's Signature:** \_\_\_\_\_

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

Please submit the completed form and supplemental documents (if there are any) via email to [ResidenceLife@dbq.edu](mailto:ResidenceLife@dbq.edu)

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**For office use only:**         *Approved*         *Denied*    *Date:* \_\_\_\_\_    *Initials:* \_\_\_\_\_