Wyoming International: Housing Waiver Request

STUDENT NAME: _____

DATE OF BIRTH: _____ **EMAIL:** _____

Waiver Request: Exceptions to the Wyoming International program housing requirement may be requested by completing this form. **All undergraduate students are required to live in program-approved housing for their first two years**, but exceptions are considered on a case-by-case basis. Students can apply for a waiver if one of the following criteria is met. Please indicate your reason below and return this form to student.services@uwyointernational.org.

- ☐ Married — and planning to live with spouse. Submit copy of marriage certificate.
- ☐ Children — and will live with children. Submit copy of birth certificate.
- ☐ Current residence — Student has been living in local residence for more than three months and would need to break a current lease to move into program housing. Please provide a copy of current lease.
- ☐ Age — Over the age of 21 at program start date.
- ☐ Immediate family member* near campus — Student would like to live with a family member near campus. Please provide family member's name, relationship, address, phone number and email.
- ☐ Medical — Student has a current condition that requires assistance completing day-to-day tasks or needs special accommodations in their living quarters. Medical records must be provided.
- ☐ Other — Students who believe they cannot be accommodated in an on-campus living environment should submit a statement outlining the request and include any documentation to support.

* Immediate family members (mother, father, sister, brother, siblings of parents)

Please use the space below to list any additional information about your exception. Please also attach copies of supporting documentation (certificate(s), current lease, family member contact information, religious statement).

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Waiver applications will not be considered if received less than 30 days before the advertised move-in date for each intake. You will receive notification via email once your waiver is reviewed. If you have any questions please feel free to contact staff at the above email address.

_____ _____ _____ _____

Student Signature *Date (M/D/Y)* *Parent or Guardian Signature (if under 18)* *Date (M/D/Y)*