Westminster College 2nd Year Residency Requirement

Westminster College is a residential liberal arts college and is committed to an educational mission that supports learning in and out of the classroom. Campus housing is an integral part of this academic experience and enhances student success and learning. Students are required to live on campus for the first two years while attending Westminster College.

It is important that families plan academic year housing well in advance of the year and commit to the year once the student moves in. This suggests a level of careful thought regarding finances, medical issues, and other personal circumstances while attending Westminster College.

Exemptions to this requirement are limited to four categories:

1. Marriage. A marriage certificate to prove actual marriage is required.
2. Financial burden which would normally require you to leave Westminster College if not allowed to move off campus.
3. Medical conditions which the college is unable to accommodate on campus.
4. Living with family within 30 miles of the Westminster College campus. This specific exemption can only be utilized prior to moving into the residence halls. After moving in, because of the binding Housing Contract, we will not approve mid-year move outs.

Each of these four reasons requires verification from third parties associated with documentation of the request. The Exemption Form must be accompanied by the documentation before decisions are made on the request.

Additionally, students must be in good standing academically and disciplinarily with the institution.
Exemption Request: 2nd Year Residency Requirement
Westminster College

First Name: ______________________ Last Name: ______________________

Current Residence Hall: ________________________________________________

ID #:________________________ Date of Birth: ____/____/_____ Email:__________________

Section 1: Must meet one of the following:

☐ Married
Please attach a copy of the marriage certificate.

☐ Financial
Please attach a copy of your Financial Aid Award letter, FAFSA form, and a letter explaining financial need.

☐ Medical
Please attach documentation from a physician, Licensed Clinical Social Worker (LCSW), or other licensed professional with reason(s) why off-campus housing is a better option and a letter explaining how medical conditions may affect living in the residence halls.

☐ Live with parent, guardian, or relative within 30 miles of the Westminster College Campus
Please attach a utility bill with the name of your relative on it as well as an explanation as to why living with a parent, guardian, or relative is a better housing option than living on campus.

Please also provide the following:

• Name of Relative: ________________________________________________________
• Relative’s Address: ________________________________________________________
• Relative’s Phone Number: ________________________________________________
• Relationship to Student: __________________________________________________
• Signature of Relative: ____________________________________________________

Section 2: Must meet all of the following:

In Good Standing

☐ Westminster College (Academically)
☐ Deans of Students Office (Must have a clean conduct record as described in the Code of Conduct)

By signature below, I acknowledge that the information provided above is correct and true. I acknowledge that I understand the request for this exemption is not permission to live off campus. I must receive an answer back on this form before that permission is granted. I understand that if I enter into a lease for another property before receiving this answer, it is at my own risk and the College administrators will not take that into consideration in their decision.

Should this Exemption Request be granted, I understand that I will lose my housing deposit and be charged a $500 cancellation fee. I understand that my housing deposit will go towards this overall fee and I understand and agree that Westminster College will bill me for the remainder of the cancellation fee. I understand that the $500 cancellation fee will be applied to my tuition account and must be paid in full prior to my class registration. I understand that my residential meal plan will also be canceled and any remaining funds will be lost.

Signature of Student: ______________________________________ Date:____________________

REQUIRED Signature of Parent/Guardian: _____________________________ Date:____________________

Office Use Only:
Request is: ☐ Approved ☐ Denied By: _____________________________ Date:____________________