Morehead State University’s On-Campus Residency Policy requires all full-time students under the age of 21 who have earned fewer than 60 University recognized college credit hours to live on campus and subscribe to the applicable meal plan requirement. Students who meet age and/or credit hour requirements by the first day of classes for a given semester do not need to submit a waiver. Students enrolled full-time on-line or at an MSU Regional Campus are exempt from this policy. Students failing to meet this requirement will be assessed the lowest residence hall fee in the form of a Mandatory Housing Fee and the applicable meal plan fee in the form of a Mandatory Meal Plan Fee.

Students may apply for an exemption to this policy, no more than once per semester, provided they meet certain established criteria. (**Please note, an application for exemption from the on-campus residency requirement does not guarantee nor imply that an exemption will be granted. Students should assume that their request has not been granted until they receive written notification of approval. This exemption, if approved, will apply to both the Mandatory Housing Fee and Mandatory Meal Plan Fee.**)

Please review the following options for release and initial next to the reason that is applicable for your request:

**Financial Hardship:**

Items needed for submission:

1. A completed Request for Waiver of the Morehead State University On-Campus Residency Policy (found on pages 4 & 5).
2. A written/typed statement regarding your financial situation.
3. Any documentation to support your statement of financial hardship.
4. All applicants for a financial hardship waiver exemption MUST have completed their financial aid file BEFORE the hardship request can be processed. You may go online at [http://www.fafsa.ed.gov/](http://www.fafsa.ed.gov/). Once this information is on file, we will examine the amount of financial aid that you receive along with the average cost of attending Morehead State University. Housing staff will consider your financial aid calculation and any changes to your financial situation that have occurred after becoming an MSU student. If you are not eligible for Financial Aid, or if your request for Financial Aid has been denied, please include this information in your statement.

**Marriage:**

Items needed for submission

1. A completed Request for Waiver of the Morehead State University On-Campus Residency Policy (found on pages 4 & 5).
2. An official copy of the marriage license filed with the courthouse.

**Single Parent:**

Items needed for submission:

1. A completed Request for Waiver of the Morehead State University On-Campus Residency Policy (found on pages 4 & 5).
2. An official copy of the child's Birth Certificate.
Commute from permanent home of parent/legal guardian, located within 50 driving miles of campus: ________

Items needed for submission:
1. A completed Request for Waiver of the Morehead State University On-Campus Residency Policy (found on pages 4 & 5).
2. If living with a legal guardian, copies of the court approved guardianship papers must accompany the request.
3. Permanent residency must be established for at least 6 months prior to students’ request for exemption of the On-Campus Residency Policy. Students must provide proof of permanent residence by submitting items such as:
   a. Driver’s license of the person you will reside with (issued at least 6 months prior to request)
   b. Utility Bills—addressed to the person you will reside with (both current bill and bill from at least 6 months prior to request)
   c. Other documentation which verifies permanent address and/or relationship to student

Internship/Clinical Semester: ________

Items needed for submission:
1. A completed Request for Waiver of the Morehead State University On-Campus Residency Policy (found on pages 4 & 5).
2. Documentation from student’s University advisor regarding the assignment location of the internship/clinical semester
3. Copy of an MSU class schedule for term requested

PLEASE NOTE: In this case, the exemption is valid for internship/clinical semester only. Students enrolled full-time for which the internship/clinical assignment accounts for less than fifty percent of enrolled credit hours are not eligible for this exemption. Internship/clinical assignments must be outside of the recognized commuter distance to qualify for an exemption.

Special Circumstances: ________

Items needed for submission:
1. A completed Request for Waiver of the Morehead State University On-Campus Residency Policy (found on pages 4 & 5).
2. Written petition noting specifically why they should be granted an exemption to the residency policy.

PLEASE NOTE: Examples of situations that would not qualify for exemption under this category include, but are not limited to, seasonal or other allergies that can be treated by allergy medications or leases entered into prior to an exemption being approved.

MEDICAL CONSIDERATION REQUESTS
Students seeking a waiver of the Morehead State On-Campus Residency Policy for medical circumstances must register for accommodation through the Office of Disability Services by contacting Evangeline Day, Disability Services Coordinator at e.day@moreheadstate.edu. This does not constitute an automatic decision or approval. The Office of Disability Services will work with the Office of Student Housing to provide students on-campus accommodations that meet their needs. Waiver will only be approved if reasonable accommodations are not available.
Requests for exemption that are submitted without proper documentation will be denied. Upon enrollment, housing and dining charges will be added to your student account unless you have an approved waiver. If your waiver is approved, please allow 48 business hours for the charge removal to reflect on your student account. If your situation changes after your waiver is approved, you must notify the Office of Student Housing in writing of the changes. The department does re-verify approved waivers after the beginning of subsequent semesters.

**Process for Obtaining a Waiver**

1. Complete the attached Request for Waiver of the Morehead State University On-Campus Residency Policy before July 15 for fall semester and December 1 for spring semester consideration.
2. Attach required documentation
3. Submit request form and documentation to Office of Student Housing via one of the following methods:
   a. Via email: housing@moreheadstate.edu
   b. Via fax: 606-783-5062
   c. Mailing address:
      Morehead State University
      Office of Student Housing
      150 University Blvd.
      1 Fields Hall
      Morehead, KY. 40351

All waiver decisions will be sent to the student’s MSU email. If your request for a waiver is denied, you may appeal this decision by notifying the Director of Housing & Residence Education, also via email. This request for an appeal must occur within ten days of the date of the original waiver decision. Should the Director’s appeal be denied and you feel additional consideration is warranted then you may file a final appeal in writing to the Waiver Appeals Board. The Waiver Appeals Board process, including deadlines and instructions, is provided in documentation on the Office of Student Housing’s website and in waiver decision communications. Please note that the Waiver Appeals Board’s decision is final and no other reviews will be considered.

If you have any questions concerning the waiver process, please do not hesitate to contact the Office of Student Housing at 606-783-2060 or via email at housing@moreheadstate.edu.
Morehead State University
Request for Waiver of On-Campus Residency Policy

Name: __________________________________________ MSU ID # ________________
Last  First  MI

Academic Term for Waiver Request: Fall/Spring (circle one) 20____

Permanent Address: ________________________________________________________________
Street  City  State  Zip

Home Phone: (____) ___________________ Date of Birth: __________________
Student Cell: (____) ___________________ High School Graduation Date: ____

Other College/University Attended: ___________________________ Hours Completed: _______

IF REQUESTING EXEMPTION FOR COMMUTING FROM PARENT OR LEGAL GUARDIAN'S RESIDENCE

Person you will be residing with: __________________________________________
Last  First  MI

Relationship: __________________________

Physical Address: ________________________________________________________________
Street  City  State  Zip

Mailing Address: ________________________________________________________________
Street  City  State  Zip

Phone Number (______) __________________________

The above address is within the approved 50-mile driving distance of campus: (circle one) Yes No

I am requesting a waiver as initialed above for the following reasons: (NOTE: Be as specific as possible. The preliminary information provided in this section will be used to evaluate your request. Attach required documentation. Further documentation may be requested before we can make a fair and equitable evaluation and decision on your request. You may attach a written statement as well)

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Please attach required documentation as outlined under each waiver category above.
Morehead State University
Request for Waiver of On-Campus Residency Policy

I do hereby certify that I have read and understand the Morehead State University On-Campus Residency Policy. I do further certify that all above information is correct. I also understand that providing false information is a violation of the Code of Student Conduct of Morehead State University as published in Eagle Handbook and may be grounds for disciplinary action by the University.

I ALSO UNDERSTAND THAT IF FALSE INFORMATION IS PROVIDED IN THIS WAIVER, IT WILL BE REVOKED AND FULL CHARGES FOR HOUSING AND DINING WILL BE ADDED TO MY STUDENT ACCOUNT FOR THE ENTIRE REQUESTED TIME PERIOD. If permission is not granted to waive the on-campus requirement, I am aware the decision may be appealed in writing. Request for an appeal must occur within ten days of the date of the denial decision.

IMPORTANT: If your situation changes after your waiver is approved, you must notify the Office of Student Housing in writing of the changes. The department does re-verify waivers after the semester begins.

______________________________   ______________________________
Signature of Student          Date

______________________________   ______________________________
(If requesting waiver for commuting) Signature of Parent/Legal Guardian   Date

For Office Use Only

Permission is: Granted / Denied by: __________________________________________

Data Entry Date: ________________   Email Conf. Date: ________________

Remarks: ____________________________________________________________________