APPLYING FOR OFF-CAMPUS RESIDENCE APPROVAL

(INSTRUCTIONS)

Attached are forms for off-campus residence approval. Please review and fill out only the forms which fit your particular needs, then follow the procedures on the attached sheet.

When you submit the application to the Student Advancement Office (Keeny Hall 305), please staple in the following order:

- application
- personal letter
- copy of approved Residential Life lease release (if applicable)
- miscellaneous forms (if applicable)

If you email the completed application to the Student Advancement Office at studentaffairs@latech.edu, please don't forget to attach the above listed items if applicable before sending. Additionally, when emailing the application, the student **must** use his/her Louisiana Tech Email. The Tech email address will serve to validate the typed signature on the fillable form.

Deadline date: Two weeks (14 days) before first day of classes for the quarter for which exemption is sought.

UPCOMING DEADLINES:

Fall 20 24	August 22, 20 24
Winter 2024-2025	November 20 , 20 24
Spring 2025	February 28, 202 5
Summer 2025	May 21, 202 5
Fall 2025	August 20, 2025

Procedure for Requesting Permission to Live Off Campus

If you are requesting permission to live off campus for one of the following reasons, please follow the steps listed below prior to submitting an application. This will aid in the consideration of your request but <u>does not guarantee exemption</u>. Please note that prior to applying for approval to live off campus, you must first be granted approval to cancel any on-campus lease through the Department of Residential Life.

Special Dietary Needs

- 1. Have your doctor complete the medical form specifying your medical condition and special dietary needs. Schedule an appointment to see the Director of Food Services (257-2327), then take the doctor's information to the Food Service Director and he/she will work with you in working out a plan that meets your nutritional needs.
- 2. If the Director of Food Services is not able to work out a plan suitable to meet your special dietary needs, ask him/her to give you a written statement to that effect.
- 3. Submit a completed off-campus application form, statement from our Director of Food Services, and a personal statement from you giving your reasons in detail for needing to live off campus.

With Family Members

- 1. Submit a statement stating who you plan to live with, how they are related to you, give their name, address, and telephone numbers (home, work, and cell numbers). Give your reasons for needing to live with this person.
- 2. Submit a notarized statement from the person with whom you plan to live confirming that you will be living with them, how long you plan to live there, and your cost of room and board.
- 3. Submit an off-campus application along with your statement.

Financial Reasons

1. Submit documentation of your financial hardship.

Miscellaneous

1. Submit a completed off-campus application form and a personal statement giving your reasons in detail for needing to live off campus.

In order to assure that you receive the decision prior to 2nd Schedule Purge date, your application must be submitted before the deadline (which is 14 days before the first day of classes for the quarter for which exemption is sought).

LOUISIANA TECH UNIVERSITY Office of Student Advancement P. O. Box 3035 Ruston, LA 71272 studentaffairs@latech.edu 318 257-2445 Fax: 318 257-2961

APPLICATION FOR OFF-CAMPUS RESIDENCE APPROVAL

Note: SIGNING A LEASE AGREEMENT OR PURCHASING A HOME PRIOR TO BEING GRANTED APPROVAL DOES NOT EXEMPT STUDENT FROM HOUSING POLICY. This request must be completed and filed in the Office of Student Affairs at least 14 days before the first day of classes for the quarter for which exemption is sought.

Name:						_
(last)	(first)		(middle)			
Check quarter for which exemption is to beg	gin: Summer	Fall	Win	ter	Spring 20	
CWID #:	Birthdate: Email:					
Local Address:			Cell Phone: _			
Current Dorm/Rm:	Local Phone:		First Qtr. at Tech:			
Parents' Name:			Hom	ne Phone:		
Parents' Address:		(city)	(state)		(zip code)	_
Total # Sem. Hrs. EARNED (including trans	sfer hrs.):	(),			(zip code)	
No. Qtrs. Lived <u>On</u> Campus:		No. Qtrs. Lived	d <u>Off</u> Campus: _			
Have you previously applied/been approved	to live off campus	s? Y	N If so	, when?		
* * *	IMPORTANT:	PLEASE REA	AD BELOW	* * *		
Attach a signed statement giving your reaso procedure listed on attached form prior to su is true and correct; the undersigned fully u appears below to separation from Louisiana Department of Residential Life. To cancel Life, P.O. Box 3174, Ruston, LA 71272.	bmitting off-camp nderstands that fa Tech University.	ous application. Ise or misleadin Exemption app	The undersignent ng information v proval does not	d certifies th vill subject 1 cancel your	nat all information the student whose the room reservation	n submitted se signature on with the
Signature of Student	(DO NOT TYP	PE/MARK BELOW THIS	Date			
Date Appl. Rec'd/					Coded	
Permanent exemption; do not need to re		COMMENTS:				
Approved through						
Approved to live with	only.					
Disapproved. May appeal to Review Committee within 5	business days.					
Chairman, Review Committee						
Action Taken by Review Committee on Appeal:					date:	
Action Taken by President's Designee on Appeal:					date:	
						9/19