

# HOUSING EXCEPTION LIVING AT HOME WITH PARENT OR GUARDIAN REQUEST & ATTESTATION FORM

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

St. Thomas Student ID#: \_\_\_\_\_

Student Cell Phone #: \_\_\_\_\_

On-Campus Living  
 religious  medical

What circumstance(s) best describe your reason for living at home:

- Financial
- Family
- Medical
- Other

Students are asked to provide a brief description of their circumstance(s) selected above as a part of the request. This description should substantiate your request.

\_\_\_\_\_  
Student signature

Date \_\_\_\_\_

\_\_\_\_\_  
Parent signature

Date \_\_\_\_\_

Any student found to have provided false information is subject to the Student Conduct Process and may be responsible for any room and board charges associated with the residency requirement.

