



HOUSING AND RESIDENCE LIFE

FRESHMAN AND SOPHOMORE RESIDENCY REQUIREMENT POLICY

- A. Bethune-Cookman University requires that all freshman and sophomore single students, enrolled for twelve (12) or more semester credit hours, reside in the University's residence halls and participate in a board plan. This requirement excludes summer sessions and is applicable until the attainment of junior academic standing, or the receipt of an exemption from the Housing and Residence Life Office.
- B. Exemptions to this requirement must be requested in writing. All requests must be submitted by July 15 for Fall Semester release, or November 15 for a Spring Semester release. **Requests must be scanned and emailed to reslife@cookman.edu. No release requests will be accepted after those dates.**
- C. Possible exemptions may be granted to students who:
1. Commute to class from the principal residence of a parent or legal guardian living within the 50 (road) commuting miles. To live with a parent or legal guardian the student must provide a birth certificate signed by one or both parents or legal documentation of guardianship, and a valid driver's license or current utility bill in the parent's/guardian's name to verify the address of his/her residence.
 2. Are twenty-one years of age or older, having reached that age no later than the first day of classes for the applicable semester or having graduated from high school more than two years prior to the beginning of the semester.
 3. Are married. A copy of the marriage certificate must be submitted as documentation.
 4. Have custody of dependent children. A copy of the birth certificate must be submitted as documentation.
 5. Can demonstrate other acceptable extenuating circumstances and provide documentation as described in the Release Request Guidelines.
- D. Upon receipt, all exemption requests will be reviewed by the Associate Dean of Housing and Residence Life. A written approval or denial will be mailed to the student. If the student's request is denied he/she will have ten (10) days in which to submit a written appeal to the Housing Review Committee as outlined in the denial letter.
- E. *Non-exempt freshman and sophomore students not residing on campus will be considered in violation of this policy.* Their records may be placed on *Administrative Hold* with the University; thus, preventing future registration and be held accountable for the financial obligation for room and board. Students found to be in violation must fulfill their on-campus requirement.
- F. Presentations of false information may be referred to the Office of Judicial Affairs for further action.**



Directions: Please read all directions before completing the Release Request Form. An incomplete request will be returned to you without action. The specific housing requirements are stated in your Housing and Food Service Agreement. Sample agreements are available in the Housing and Residence Life Office or on our web page.

Please refer to the following when applying for a release:

1. Submit completed application by July 15 for a Fall Semester release, or by November 15 for a Spring Semester release. If you have any questions about this process, you can call our office at: 386-481-2420.
2. Be specific and orderly in presenting your reason(s) for requesting a release. Avoid generalizations. List your reasons in priority of importance, and include all of your documentation, i.e. financial statement, doctor's letter, etc. If you have previously signed a housing agreement, *the request must establish how your circumstances or conditions have changed since the agreement was first signed.*
3. All documentation and information must be furnished along with the request form. *Do not submit documentation and Release Request separately.*
4. Disposition of the request will be made *in writing* as soon as possible, generally no later than two weeks after the deadline if all documentation was provided.

NOTE: *You should not make alternative housing plans until a written decision has been received.*

5. *It is important that you include ALL your reasons and information with your completed form. If your release request is denied and you choose to appeal, no new information will be considered*

Necessary documentation for consideration:

The following examples pertain to the most frequent reasons for seeking a release from the contract or residency agreement. Your rationale is not limited to these examples.

1. **Marriage:** Please include date of marriage on the Release Form. A notarized copy of your marriage certificate must be submitted within ten working days after the marriage and prior to any refunds processed for a room and/or board. Release will be effective the day after marriage occurs.
2. **Medical:** A statement should be obtained from your personal physician and submitted to the Assistant Vice President for Health and Wellness at Bethune-Cookman University. This information will not be shared with others who are not in the need to know. The statement should indicate:



- A. History of medical problem(s);
- B. Pertinent physical finding(s);
- C. Diagnosis;
- D. Report on related laboratory or X-ray findings;
- E. Treatment, including a copy of any special diet or restriction; and
- F. How the medical problem prohibits you from residing in a residence hall.

3. **Other:**

- B. **Living with Family Member:** A request to commute and live with a parent or guardian will require the completion of a “Release Request to Commute” form in lieu of application for housing and food service. Commuting distance is considered if the permanent residence is less than 50 travel miles from campus. All freshman and sophomore single students will be required to complete either an application for housing and food service or a request to commute form. Students must show that proof of parental or legal guardianship. Please note that this address must have commenced as a permanent address prior to graduation from high school or before applying to Bethune-Cookman University.
- C. **Conditions in the Residence Halls:** Conditions such as noise, food, roommate problems, etc. are not considered valid in terms of release from your contract. These types of problems should be discussed with your Residence Life Coordinator or the Director of Housing and Residence Life. Problems such as these can be solved by staying within the residence hall system either by a room change, building change, or strict enforcement of rules and regulations.
- D. **Other:** Please provide appropriate and relevant documentation supporting any request that is not covered by the above categories.



REVIEW PROCEDURES

1. Upon receipt of all required information, the Associate Dean of Housing and Residence Life will evaluate your request. You will be notified in writing of the decision as soon as possible. (Generally decisions are rendered no later than two weeks after the deadline date.)
2. Appeal must be submitted, in writing to the Housing Review Committee, within ten days of receipt of the denial notification.
3. Submission of an appeal does not release you from any current financial or residential obligations. The effective date of action will be specified in the notification. You will be accountable for all financial charges up to and including that date, and for any charges occurring as a result of damage to your room.
4. Students who are granted a release from the Housing and/or Food Services Agreement are required to follow established procedures for checking out of their room. You should consult your respective Residence Life Coordinator about those policies.



**ROOM & BOARD REQUIREMENT RELEASE REQUEST
HOUSING AND RESIDENCE LIFE**

PRINT NAME: _____ DATE: _____

I.D. NUMBER: _____ DATE OF BIRTH: _____ CREDITS COMPLETED: _____

CAMPUS ADDRESS: _____ PHONE: _____

NAME OF PARENT GUARDIAN: _____

HOME ADDRESS: _____
STREET/BOX NUMBER CITY STATE ZIP

HOME TELEPHONE NUMBER: _____

DATE OF HIGH SCHOOL GRADUATION: _____ YEARS AT RESIDENCY: _____

DESIRED DATE OF RELEASE: _____
MONTH DAY YEAR

REASON FOR REQUEST: MEDICAL COMMUTE

CHECK BELOW THE DOCUMENTS THAT WILL ACCOMPANY THIS REQUEST:

Statement from the Assistant Vice President of University Health Services or attending physician.

Statement from the University Counseling Center.

Letter from your parent or legal guardian.

Birth Certificate

Proof of Address (driver's license or utility bill)

Marriage Certificate

Legal documentation of guardianship



On a separate sheet of paper or within the body of your email, please state clearly your reasons for requesting this release. Remember, appropriate documentation is required as stipulated in the directions for certain types of requests. All supporting materials must be attached. Your signature is required on this document.

This information supplied on and with this request is, to the best of my knowledge, accurate. If false information is submitted, I understand that my release will automatically be denied and I may be referred for disciplinary action.

SIGNED: _____ DATE: _____

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OFFICE USE ONLY

Received by: \_\_\_\_\_ Date: \_\_\_\_\_ Decision: [ ] Approved [ ] Denied



**RESIDENCY REQUIREMENT MEDICAL RELEASE  
HOUSING AND RESIDENCE LIFE**

**NAME:** \_\_\_\_\_

**ID#:** \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_

**REASON FOR MEDICAL RELEASE:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**NAME OF PHYSICIAN:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**I hereby authorize the above captioned physician to release my medical history and condition to determine if off campus housing is warranted to:**

**Bethune-Cookman University  
Assistant Vice President of Health Services  
Housing and Residence Life  
640 Mary McLeod Bethune Blvd., Daytona Beach, FL 32114  
(386) 481-2420**

**NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
(Please Print)

**SIGNATURE:** \_\_\_\_\_



**RELEASE REQUEST TO COMMUTE  
DEPARTMENT OF HOUSING AND RESIDENCE LIFE  
BETHUNE-COOKMAN UNIVERSITY**

I, \_\_\_\_\_, verify that my son/daughter  
PRINT PARENT/GUARDIAN'S NAME

\_\_\_\_\_, \_\_\_\_\_  
PRINT STUDENT'S NAME STUDENT'S ID#

I will be residing with a parent or guardian address, which is within the maximum 50 travel mile radius of the campus. I understand that violation of this agreement will result in my son/daughter being required to move back on campus, pay the room portion of the contract or both. Proof of parental or guardianship status is included with this request.

My permanent address is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent or guardian's name, \_\_\_\_\_  
whom you will be living with:

Commuter Address: \_\_\_\_\_  
\_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Number of travel miles from Bethune-Cookman University: \_\_\_\_\_

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_