



Alderson Broaddus University

Off-Campus Housing Policy

Office of Residence Life • 101 College Hill Drive • Box 2092 • Philippi, WV 26416 • (304) 457-6213

In order to fulfill its educational purposes, Alderson Broaddus University is primarily a residential institution and requires all single, full-time undergraduate students to reside in residence halls. Exceptions to this requirement MAY be made for single students who meet at least one (1) of the following requirements:

1. Residing with parent(s), grandparent(s), or a legal guardian within a 50 mile radius of Philippi (must complete and submit a Parental Statement form), or
2. Enrolled for an off-campus experience at least 50 miles from Philippi as part of graduation requirements, or
3. 24 years of age or older, or
4. Honorably discharged military veterans (must submit documentation), or
5. Holders of a baccalaureate degree from an accredited institution of higher education, or
6. Employed by a church and choose to live in housing provided by the church, or
7. Having children who live within your household and you provide more than half their support, or
8. 5th year Senior or Senior having completed at least 105 hours of undergraduate work.

Please note that this list may not be inclusive of all criteria. Students should refer to the most updated version of the *Student Handbook* to review the most current policy. **Applications must be renewed each year and must meet the deadlines to continue to reside off campus.**

IMPORTANT FINANCIAL INFORMATION

Financial Aid may be affected when a student changes from on-campus to off-campus residency. Students **MUST** speak with a Financial Aid Counselor prior to submitting this application.

Living off-campus will result in the loss of the following grant(s): _____, \$_____

Please mark here if you **DO NOT** recommend this student for off-campus living: _____

F.A. Counselor Name

F.A. Counselor Signature

Date



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Off-Campus Residency Application

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Name: _____ I.D. # _____
(Last Name, First Name, M.I.)

Home Address: _____
(Number and Street) (City, State, ZIP)

Phone Number: _____

Current Class: FR SO JR SR GR Total College Credits Completed: _____

Requested Semester(s) Off-Campus: Fall 20____ Spring ____

Please check the criteria below that may exempt you from the On-Campus Residency Requirement:

- Residing with parent(s), grandparent(s), or a legal guardian within a 50 mile radius of Philippi (must complete and submit a Parental Statement form), or
- Enrolled for an off-campus experience at least 50 miles from Philippi as part of graduation requirements, or
- 24 years of age or older, or
- Honorably discharged military veterans (need documentation), or
- Holders of a baccalaureate degree from an accredited institution of higher education, or
- Employed by a church and choose to live in housing provided by the church, or
- Having children who live within your household and you provide more than half their support or,
- 5th year Senior or Senior having completed at least 105 hours of undergraduate work.

Address of Prospective Housing:

Landlord Address & Contact Information:

I understand that an interview and verification of the above information may be required. I understand that falsification of information on the application will automatically result in rejection of the application, or, if approval has occurred, revocation of the approval and would further result in a penalty of the single room charge of the semester that I am in violation, as well as possibility of suspension or expulsion from Alderson Broaddus University.

 Student Signature

 Date

OFFICE USE ONLY: Date Reviewed: _____

Approved

Denied

 Director of Residence Life Signature



Alderson Broaddus University Off-Campus Housing Parental Statement

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INSTRUCTIONS:

Please have the relative with whom you will be living complete and sign this form. You must also have it notarized in the space provided. Return the completed form to the Office of Residence Life.

Student Name: _____ I.D. #: _____
(Last Name, First Name, M.I.)

Name of Relative: _____ Relationship: _____
(Last Name, First Name, M.I.) (parent, grandparent, or legal guardian)

Home Address: _____
(Number and Street) (City, State, ZIP)

NOTE: Residence must be within 50 miles of Philippi.

Email Address: _____ Phone Number: _____

Semesters during which student will reside: Fall 20__ Spring 20__ Summer 20__

I understand that falsification of information on the application will automatically result in rejection of the application, or, if approval has occurred, revocation of the approval and would further result in a penalty of the single room charge of the semester that the student is in violation, as well as possibility of suspension or expulsion from Alderson Broaddus University.

Signature of Parent, Grandparent, or Legal Guardian)

Date

Please notarize here:

Signature of Notary Public

Date