

UNIVERSITY OF CALIFORNIA  
CENTER SACRAMENTO  
HOUSING EXEMPTION FORM

APPLICATION FOR:

<input type="checkbox"/> Fall Quarter 2006	<input type="checkbox"/> Winter Quarter 2007	
<input type="checkbox"/> Spring Semester 2007	<input type="checkbox"/> Spring 2007	<input type="checkbox"/> Summer 2007

PERSONAL INFORMATION

Name \_\_\_\_\_ Student ID \_\_\_\_\_

Current Address \_\_\_\_\_  
(Number & Street) (City) (State) (Zip)

Current Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Cellular Phone \_\_\_\_\_

Permanent Address \_\_\_\_\_

Please explain why living in the UC Center accommodations would cause you a hardship.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is your housing alternative? Please be specific.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date