08-18-2020
Srinivasan Natarajan
4 Dylan Way
Edison NJ 08820

To
Housing Information Office
100 Clark Hall, 1203 S.Fourth St
Champaign IL 61820

Dear Sir,

My daughter, Smruthi Srinivasan (UIN#: 669315871) is a freshman at the Grainger College of Engineering at UIUC this fall. Due to the ongoing COVID-19 pandemic and the quarantine requirements of our home state of New Jersey, Smruthi opted for the online classes in the 2020-21 academic year.

We will be providing all the required support for our daughter, Smruthi, while she is pursuing her online classes from our home.

Regards,

N. Srinivasan

(Srinivasan Natarajan)

UNIVERSITY HOUSING
Student Affairs: We're Everywhere You Are.

I

RETURN TO:

Housing Information Office
100 Clark Hall, 1203 S. Fourth St.
Champaign, IL 61820-6982

2020-21 Academic Year ✓   Spring 2021 Only ———

NAME Smruthi Srinivasan   UNIVERSITY ID# (UIN) 669315871

PREFERRED NAME Smruthi   GENDER F
(IF DIFFERENT FROM ABOVE)

CURRENT ADDRESS 4 Dylan way   Edison   NJ   08820
(SPRING ONLY REQUESTS)   *(STREET)*   *(CITY)*   *(STATE)*   *(ZIP CODE)*

DATE OF BIRTH 01/19/2002   AGE 18   HIGH SCHOOL GRADUATION DATE 06/2020
(MM/DD/YYYY)   *(MM/YYYY)*

PERSONAL EMAIL ADR mail2smruthi@gmail.com ILLINOIS EMAIL ADR smruthi2@illinois.edu

HOME PHONE 732-986-0532 (MOBILE) CELL PHONE 732-766-6576

NAME OF PARENT(S) SRINIVASAN NATARAJAN & HEMALATHA RAJARAM

PARENT'S ADDRESS 4 Dylan Way   Edison   NJ   08820
                 (STREET)   *(CITY)*   *(STATE)*   *(ZIP CODE)*

Will you have completed 2 semesters as a live-in resident at a college/university by August 24, 2020?

Circle: Yes   (No)   **(If Yes, documentation is required. Please refer to #7).**

Proposed living arrangement (include address if different than parents') _____

Please state your request and reasons below for applying for a waiver. Note: A parent/guardian letter **must be attached supporting your request. If the reason for the request is medical in nature, please contact the Housing Information Office at 217.333.7111 or housing@illinois.edu for further instruction.** *(Continue on reverse side or additional sheet if needed.)*

COVID-19 Situation

Student Signature Smruthi S.   Date 8/18/2020

Office Use Only

Parent Letter Attached: Yes   No   ☐ APPROVED   ☐ DENIED

Student Type: _____   Reason: _____

Banner Matches: Yes   No   High School _____

Earned Hours _____   Graded Hours _____   Institution _____

Authorized by _____   Date _____

☐ Scan   ☐ ODOS   ☐ PCH DB   ☐ Email