Royal Roads University U-Pass Exemption Request

Maximum Exemption Period: September 1 to August 31, inclusive

	Please print clearly				
	STUDENT NAME	 Last Name		First Name	
	STUDENT NUMBER	PROGRAM			
exe	mption provisions: [Plea	ase check one categ	ory only. Required sup	e conditions of one of the following oporting documentation must be dentservices@royalroads.ca.]	
	I have a demonstrated of handyDART services.	disability and as a re	esult cannot use conv	entional public transit or d from RRU Accessibility Services	
	I hold a Government of Required supporting		by the BC Governmer tocopy of the bus pass		
	I hold a valid University Required supporting name, student ID, and	documentation: print	t out of student fees fro	om another institution that includes	
	Required supporting	documentation: prod	of of current address, su	onal Transit Service Area. Ich as a utility bill or valid ID with you by special agreement due to COVID-	
	STUDENT SIGNATURE			- -	
	OFFICE USE ONLY				
	Decision: Granted	Denied	Date notified:		
	Exemption period:				
	Reason:				
				nd is subject to the Freedom at Intermation and	

The personal information collected in this form is collected under the authority of the University Act and is subject to the Freedom of Information and Protection of Privacy Act. The personal information collected will be used to assess U-Pass exemption requests only at Royal Roads University. For more information regarding the collection and use of personal information please contact Royal Roads University's Privacy Officer via email at privacyofficer@royalroads.ca or in writing to 2005 Sooke Road, Victoria, BC Canada, V9B 5Y2.