



# Application to Commute from Parent(s) Home

George Fox University is a residential university that is committed to providing a Christ-centered community environment where students can be challenged and supported during their academic endeavors. George Fox University considers residence life to be an integral part of a students' education and overall university experience. The university has a three-year residency requirement for traditional undergraduate students.

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

Campus Box # \_\_\_\_\_ Phone # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name of Parent(s) \_\_\_\_\_

Parent(s) Address \_\_\_\_\_

Parent(s) Phone # \_\_\_\_\_

### Parent Statement

*This is to state that the above named student is my son / daughter and he / she will be living with me for the duration of the school year. (Please initial all statements):*

- \_\_\_ I acknowledge that my son / daughter will be living with me at the address listed above.
- \_\_\_ I have read and understand the George Fox University Lifestyle Agreement. I understand that my student is expected to abide by this agreement while living off-campus.
- \_\_\_ I understand that my son / daughter is to live with me at the stated residence for the entire academic year.
- \_\_\_ I understand that this application is only for the current academic year only, and that my son / daughter will need to reapply for commuter status each academic year.
- \_\_\_ I understand that if my son / daughter chooses not to live with me at any point during the academic year, he / she would be required to reside in on-campus housing.
- \_\_\_ I understand that for this application to be approved, my residence must be within 60 miles of George Fox University's Newberg Campus.
- \_\_\_ I understand that living at home may affect my son / daughter's financial aid. (Please contact Student Financial Services for any information regarding your bill and / or financial aid.)

### Student Statement

*This is to state that I will be living with my parents for the duration of the school year. (Please initial all statements):*

- \_\_\_ I have read and understand the George Fox University Lifestyle Agreement. I agree to abide by this Agreement while living off-campus.
- \_\_\_ I acknowledge that I will be living at the stated address with my parents.
- \_\_\_ I acknowledge that the information on this form is true and accurate and that falsification of any information may adversely affect my eligibility to live off-campus in the future and / or I may have to: pay for a semester of housing, pay a \$300 fine, be asked to move into campus housing, and / or other consequences deemed appropriate by the Housing Office.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return this form to the Student Life Office • 414 N. Meridian St. Box 6148 • Newberg, OR 97132 • Fax 503-554-2339

**For Office Use Only:**

Approved  Pending  Denied:Reason \_\_\_\_\_  NP  OFFC Initials \_\_\_\_\_ Date \_\_\_\_\_