

□ Approved □ Pending □ Denied: Reason

APPLICATION TO COMMUTE FROM HOME

□ NP □ OFFC Initials_

Date_

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 student's education and overall university experience. The University has a two-year residency requirement for traditional undergraduate students.

If a student desires to commute from the home of their parent(s) or legal guardian, they must complete and submit the following by August 1st for Fall or December 1st for Spring Semester. University Housing will review applications and notify students if approved.

Name	Student ID #	Semester Applying for (ex: Spring 2019)
Name of Parent(s) or Legal Guardian	
Home Address _		
Phone # for Pare	nt(s) or Legal Guardian	
	IT - This is to state that the above named year. (Please initial all statements):	I student is my son/daughter and he/she will be living with me for the
I acknowledge	that my son/daughter will be living with	me at the address listed above.
	d understand the George Fox University agreement while living off-campus.	Lifestyle Agreement. I understand that my student is expected to
I understand that my son/daughter is to live with me at the stated residence for the entire academic year.		
	that this application is only for the currener status each academic year.	at academic year only, and that my son/daughter will need to reapply
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 GFU's Newberg Campus.		
	hat living at home may affect my son/da tion regarding your bill and/or financial a	ughter's financial aid. (Please contact Student Financial Services for id.)
STUDENT STATEME statements):	NT - This is to state that I will be living w	ith my parents for the duration of the academic year. (Please initial all
I have read an	d understand the GFU's Lifestyle Agreem	nent. 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.		
affect my eli	gibility to live off-campus in the future ar	e and accurate and that falsification of any information may adversely nd/or I may have to: pay for a semester of housing, pay a \$300 fine, be nsequences deemed appropriate by University Housing.
Parent/Guardian S	ignature	Date
Parent/Guardian Signature		Date
Student Signature		Date
	– Please send t	to University Housing –
– Mail: 414	N. Meridian St. #6148 Newberg, OR 973	132 – Fax: 503.554.2339 – Email: housing@georgefox.edu –
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