HOUSING AND RESIDENCE LIFE

FIRST TIME FRESHMAN RELEASE REQUEST TO COMMUTE

(Use for students not withdrawing from university,
seeking to reside off campus and does not currently live on campus.)

I, _____, verify that my son/daughter
PRINT PARENT/GUARDIAN'S NAME

_____ , _____
PRINT STUDENT'S NAME RAM ID#

will be residing with a parent or guardian address, which is within the maximum 50 travel mile radius of the campus. I understand that violation of this agreement will result in my son/daughter being required to move back on campus, pay the room and board portion of the contract or both.

Parent or guardian's name, whom you will be living with: _____

Address: _____

_____

Parent's Address (if different from above) _____

_____

Number of travel miles from Albany State University: _____

This document must be accompanied by a copy of the Student's driver's license.
Parent and student signature is required.

Parent/Legal Guardian Signature_____ Date:_____

Student Signature_____Date:_____

Housing Official Only (below)

Received By: _____ **Date**: _____