

## Request to Commute from Home of Parent or Legal Guardian

Arkansas Tech University has a two-year live-on requirement in university residence halls. This requirement does not apply to:

1. Students who live with their parent or legal guardian within 30 miles
2. Students who have completed 60 college credit hours (excluding high school concurrent)
3. Students who are 21 years of age or older as of the first day of classes for the semester enrolled.
4. Students who are married.
5. Students with dependent children.

Only those students whose parent/legal guardian lives within the 30 miles of Arkansas Tech University, will be allowed to commute. If outside the 30 mile radius please complete the Residence Life Exemption Form in addition to the commute form. **This form must be submitted prior to the first day of classes for the semester in which you are enrolled.**

For the  2019-20 academic year, I plan to live at the home of my parent/legal guardian, which is located within 30 miles.

Student Name: \_\_\_\_\_ T#: \_\_\_\_\_

Commuting Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Student Cell Phone Number: \_\_\_\_\_ Student Email: \_\_\_\_\_

**Please read this statement carefully before you sign and submit your request:**

My signature below verifies that I am aware of the policy and that I will live with a parent or legal guardian and commute to campus. I am aware that knowingly furnishing false information or false reports to any University official, faculty member, or office is a violation of the Student Conduct Rules and Regulations and may result in disciplinary action. I further certify that I will remain in compliance throughout the time period indicated above. I understand that if I move from the above address without written permission from the Department of Residence Life, that this commuter verification form will become null and void, and I will be in violation of the residency policy.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

**THIS SECTION MUST BE COMPLETED IN FRONT OF A NOTARY** *(available at any bank)*

**Parent/Legal Guardian**

As the **parent/legal guardian** of \_\_\_\_\_ I am verifying that s/he is commuting from my residence at the address listed above. I am also aware that if s/he is found NOT to be living at this address, s/he will be held financially responsible for all room charges.

**Parent/Legal Guardian's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Notary Public**

This instrument was signed and sworn to before me in the city of \_\_\_\_\_ on \_\_\_\_\_  
(City) (Date)

By \_\_\_\_\_  
(Printed name of parent/legal guardian)

\_\_\_\_\_, Notary Public, State of: \_\_\_\_\_ County of: \_\_\_\_\_  
(Notary signature)

My Commission expires on \_\_\_\_\_ Stamp: \_\_\_\_\_

**IMPORTANT: A copy of the parent/legal guardian's driver's license must accompany this form in order for the commuter form to be processed. The address on the driver's license must match the commuting address where the student will live for the academic year.**

**Mail completed form and copy of the parent/legal guardian's driver's license to:**

Department of Residence Life, 1605 Coliseum Drive, Doc Bryan, Suite 211, Russellville, AR 72801.

Your application will be reviewed and you will be notified via your ATU e-mail account as to the outcome of your request.