Commuter Status Application

Application Deadline:
Tuesday, March 29th by 5:00 p.m. to Residence Life Office
Sullivan Student Center 230
Blue Housing Card must be attached to application

Name _________________________________  E-mail _____________________________
Cell phone _____________________________  SMC # _________           Class Year ______

In order for a St. Lawrence student to be granted commuter status, the student must qualify under specific criteria. In most instances, it will be necessary to provide supportive documentation. Commuter status can be granted under the following conditions:

You.... (check all that apply)

☐ were born before September 1, 1992. (Attach a copy of your birth certificate or current driver's license.)

☐ have legal dependents (other than a spouse). (Attach a copy of birth certificate/custody papers.)

☐ are married. (Attach a copy of marriage certificate.)

☐ will be living with parent(s) or legal guardian(s) in their legal and established residence within the immediate area. (Complete section below with notarized signatures from parent(s) or legal guardian(s) stating that you will be living with them for the 2016-17 academic year.)

☐ qualify as an independent student according to federal guidelines for student financial aid. (Attach statement of verification from the Office of Financial Aid)

We reserve the right to request proof of your status.
Parent(s) or Legal Guardian(s) Section:

_____________________________ will be living with us at home for the 2016-2017 academic year. If the student is found to be living other than their legal home residence, the student will be assigned room/board on campus and will be held accountable for those costs.

________________________________________________________________________________

Parent(s) or Legal guardian signature(s):

Applicants Signature __________________________ Home Phone ____________________________

Home Address ______________________________________________________________________

Date of application_______________________

Notary Public _______________________________________ Date___________________________

Notary Stamp to verify parent or legal guardian signature(s):
**Return the signed Waiver Statement to the Office of Residence Life.**

**WAIVER STATEMENT**
The following statement, approved by the Board of Trustees of St. Lawrence University in January 1984, must be read and agreed to (as indicated by your signature) by all students planning to reside in a non-university owned residence.

I, the undersigned student, presently in attendance at St. Lawrence University, desire to reside off campus in private housing selected by me, and do hereby release, quit claim, discharge and waive any and all claims against St. Lawrence University, its agents and employees for property damage, personal injuries, or death, which I or my estate representative, heirs, distributees, or next of kin may sustain, arising out of residence in non-university owned housing.

**YOU MUST SIGN THIS FORM IN ORDER FOR YOUR HOUSING TO BE CONFIRMED:**

<table>
<thead>
<tr>
<th>Signature</th>
<th>Date</th>
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*If you chose not to agree to the statement, please sign here*

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<th>I DO NOT AGREE:</th>
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<tbody>
<tr>
<td>Signature</td>
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__________________________________  ______________________
(Print your name)                    (Print your Off-Campus address)

__________________________________
(Your Off-Campus phone number)