

**VALPARAISO UNIVERSITY**  
**OFFICE OF RESIDENTIAL LIFE**  
Commuting Student Agreement

Today's Date \_\_\_\_\_ This agreement is for: (indicate academic year) \_\_\_\_\_

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

Present Local Address \_\_\_\_\_ Phone \_\_\_\_\_

Intended Commuting Address (street, city, state, zip) \_\_\_\_\_

\_\_\_\_\_ Phone \_\_\_\_\_

Class Standing during period for which you are requesting exemption: FR \_\_\_\_ SO \_\_\_\_ JR \_\_\_\_

Date of Birth \_\_\_\_\_

*Valparaiso is by design a residential University. Living on campus represents an integral component of the mission of the institution by providing living and learning experiences which lead to a student's growth and development, and an enhancement of one's total education at VU. Because residentiality is such an important aspect of the VU experience, **all freshman, sophomore, and junior students are required to live in University-operated residence halls.** Exceptions are made for students who will live with a parent or legal guardian(s) at their primary residence and commute from their home.*

*A student who decides mid-year that he/she wishes to commute is not automatically excused from his/her Housing Agreement. Students who are released from their Housing Agreements mid-year are subject to a \$200 cancellation fee.*

**To the Student:**

- I hereby announce my intention to be a commuter student for the academic year indicated above. I will live with my parent or *legal* guardian at his/her primary residence, the address of which is stated above. This address is within the "reasonable distance" limit, which is the shorter of 50 miles or one-hour commute time.
- This address will be the primary residence for both my parent/legal guardian and myself. As a primary residence, the occupants, including myself, will spend an average of no less than five days and nights per week in this home.
- I understand that my approval to commute is contingent upon my residing *with* my parent or legal guardian at the address listed above. I understand that I am not allowed to live off-campus at the address of my choosing and that I have no intention to do so.

(over)

- I understand that if I violate this agreement by choosing to live away from my parent or legal guardian and at an address other than that listed above, I will be billed for university residence hall housing retroactive to the start of the academic year and may also be held accountable for dishonesty through the university judicial system. I understand that if the university determines that I am in violation of this agreement, the burden of proof rests with me to show that I am not in violation of the agreement.
- I understand that this agreement is in effect for the academic year indicated at the top of the form. I understand I am required to submit a new form for each academic year that I choose to live with my parent or *legal* guardian at his/her primary residence, the address of which is stated above.

**Signature of Student:**

**Date:**

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**To the Parent/Legal Guardian:**

- I certify that I am the biological or adoptive parent; or legal, court-appointed guardian of the student listed above.
- I certify that this student will reside with me in my permanent home and primary residence, which is listed above. As this is our primary residence, I intend to spend an average of no less than five days and nights per week in this home, and will insure that the student listed above also does so.
- I understand that approval for my student to commute is contingent upon his/her residing *with* me at the address listed above. I understand that my student is not allowed to live off-campus at the address of his/her/our choosing and will insure that my student does not violate this agreement by obtaining an off-campus residence.
- I understand that if my student violates this agreement by choosing to live away from his/her parent or legal guardian and at an address other than that listed above, that he/she will be billed for university residence hall housing retroactive to the start of the academic year. I understand that if the university determines that my student is in violation of this agreement, the burden of proof rests with my student to show that he/she is not in violation of the agreement.

**Signature of Parent/Legal Guardian:**

*(to be witnessed by Notary Public)*

**Date:**

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**Signature of Notary Public:**

**Date:**

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**My commission expires:**

**County:**

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