PARENT/ GUARDIAN HOUSING AGREEMENT

Student's Name:				_	
Student's Date of Birth:	_//				
Name of Parent/ Guardian				<u> </u>	
Occupation of Parent/ Guardian	1				
Parent's Phone Numbers, inclu	ding area codes	S:			
Home	Cell		Business		
Student's Permanent Home Ad	dress:				
Street		City	State	Zip Cod	е
I confirm that the student name throughout his/ her tenure as a student and I will notify the Offic provide a new permanent home. I understand and agree to the formal tendence in classification of the students are also required to constand the start of the Fall semester academic and housing records.	d above will ma resident at Monce of Residence address. collowing: rogram requires asses and a grace omply with all coclose in August, during which till are examined examin	that resident strate and resident at the end of the end of the end seems terms are each semester to	ent home address as he address listed ab udent Services Offic udents maintain goo e of 2.0 or higher eac ence life policies, pro e Spring semester a e expected to live off o determine continue	cove changes, the ce immediately and will od academic standing ch semester. Resident ocedures and communitand reopen in Septemb f campus. The student ed eligibility for housing	ity oer 's
the student must leave campus housing Parent/ Guardian's Name- PLE Parent/ Guardian's Signature	ASE PRINT				
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