



**Application for Commuter Status
& Parent/Legal Guardian Verification**

Student Name: _____ ID#: _____

For Academic year: 20__ - 20__

Permanent Home Address: _____
City: _____ State: _____ Zip: _____

Conditions for commuter Status:

- The student will be living with the parent/legal guardian in the established family home, which is the address listed above, and is the same address listed in the FAFSA.
- The home is within the required 30 mile radius from Illinois Wesleyan's campus.
- The student will remain living in the home and will not maintain any other residence as long as the on-campus residency requirement applies (through the end of the 6th semester). Should the home address change for any reason, and updated address change form should be filled out.
- If it should be determined that false information was provided and/or the student is discovered living elsewhere and the above requirements have not been satisfied, the student will be billed full room and board for the entire academic year and required to reside in on-campus housing.

Student Statement:

- I certify that the information I have given in this application is true and accurate.
- I affirm I will be living at home with my parent(s)/legal guardian(s). If I am found to be living anywhere else, I accept full responsibility and agree I would be providing false information to the University, a violation of the Student Code of Conduct.
- I understand I must re-apply for off-campus or commuter status whenever the information stated on this application is no longer accurate (e.g. change of address) and/or for each academic year.
- I understand if I am found to be living off-campus and I have not received formal approval, I will be immediately charged room and board for the academic year.
- My parent(s)/legal guardian(s) understand this policy and are aware of my intentions to live at home. The information they provide below is accurate.
- I grant the office of Residential Life permission to access FAFSA data to confirm the address.

Student Signature _____ Date _____

Parent Certification of Commuter Status:

- I certify the student named above will be residing in my home, within a 30-mile radius of Illinois Wesleyan University and will be commuting to campus. This is the same address provided on the FAFSA and is the permanent home mailing address of the student and myself. I understand if my student is found to be living in a location different than listed above, they will automatically be billed for the full amount of room & board for the entire academic year and required to reside in campus housing.
- If my address has changed or is different than the permanent address provided on the original application to the University or the FAFSA filed this year, I have attached a photocopy of my Illinois Driver's License with the new address.

Print Name _____ Relationship to student _____
Signature _____ Date _____
Phone # _____ Cell Home Email _____

Applications are due March 1. Applications may be emailed to dmeyer@iwu.edu or faxed to (309) 556-2961.