

Permission to Live Off Campus Form

Abilene Christian University

Office of Residence Life

It is the policy of Abilene Christian University that all full time students attending the University live on campus for their first two academic years. Exceptions to this policy can be found on our website, www.acu.edu/reslife. Students requesting to live at home with their parents who live in the Abilene area are required to file this form with the Office of Residence Life.

Student's name: _____ Student's Banner ID: _____

Permanent address:

This is to certify that (print student's name) _____ will be living at the above address with me during the (print year requesting for) _____ academic year.

My signature also certifies that I understand and agree to a fine, equal to the average residence hall price and the lowest eligible meal plan price, should it be discovered that the above named student is not living with me at my permanent address for the entirety of the academic year.

Signature of Parent/Legal Guardian

Date

Signature of Student

Date

State of _____

County of _____

This instrument was acknowledged before me

on _____ (date)

by _____ and _____ (names of persons)

(Signature of Notary Public)

(Seal)