

EVANGEL UNIVERSITY

OFF-CAMPUS PARENTAL ENDORSEMENT

Required of single, dependent students living with parents, grandparents, or legal guardians

***To utilize fillable functionality, save to your computer and open in Adobe Reader**

Academic year for which your student is applying: Fall, 20__ Spring, 20__

I am the student's: PARENT GRANDPARENT LEGAL GUARDIAN*

I verify that my student, _____, is planning to live at home while attending Evangel University and will comply with all of the following:

- He/she will live with me at my permanent residence on a full-time basis for the entire academic year and will not reside elsewhere at any time. Should this change I acknowledge that he/she will be required to immediately notify the Housing Office and make arrangements to move back into a residence hall if one of the other off-campus criteria is not met.
- Students living at home must submit a new off-campus questionnaire and parental endorsement each fall.
- It is not an option for a parent to become the student's part-time or full-time roommate or housemate in an attempt to gain approval for the student to live off campus; nor is it acceptable for a parent to rent, lease or buy a Springfield-area property in order to gain approval for the student to live off campus "at home." Please contact the Housing Office for further clarification if needed.

By signing this form I acknowledge that the penalty for being out of compliance with University housing policy will result in a \$200 penalty (per semester) and violators will be mandated to move back on campus or face disciplinary action.

Parent Name (please print clearly)

Parent email address

Parent Signature

Date

Parent cell phone including Area Code

Parent work phone

*Legal guardianship must have been established through the courts prior to age 18.

Return this form to:

FAX: (417) 865-9599

EMAIL: SmallwoodP@evangel.edu

**MAIL: Evangel University Housing Office
1111 N. Glenstone Ave
Springfield MO 65802**