

# GLENVILLE STATE UNIVERSITY

## Commuter Status Verification Form

Completed forms should be uploaded with the Off-Campus Housing Application or emailed to Student.Life@glenville.edu

Glenville State University requires all full-time students to reside on-campus in one of the University's residential living facilities unless granted an exemption. All students seeking an exemption to this policy must apply and submit all supporting documentation for their request to be considered.

In accordance with GSU's Residential Policy, students may reside with an immediate family member (parent/legal guardian/grandparent/sibling) who is over 21 years old that lives within a 50-mile driving radius from the University according to Google Maps.

If a student wishes to apply for the residing with an immediate family member exemption, they must complete this form in its entirety and have it notarized by a Notary Public. This form must be resubmitted yearly for approval. This form does not guarantee that off-campus status will be granted.

Students seeking an exemption (for the current academic year - August-May) must complete the application in full and submit all supporting documentation **no later than the Friday of the first week of classes of the fall semester.**

**Any student who knowingly misleads or provides false information for the purpose of obtaining a housing exemption is subject to university discipline and may be responsible for all on-campus housing and charges equal to the time residing off-campus. Any student who lives off campus but has not been approved for an exemption, will be charged as if they are living on campus.**

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### ***AREA TO BE COMPLETED BY STUDENT AND IMMEDIATE FAMILY MEMBER***

Student's Name (first and last): \_\_\_\_\_ GSU ID# \_\_\_\_\_

Student's Address of Residency: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Student will be residing with:*

Immediate Family Member's Name (first and last): \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Phone Number of the Family Member: \_\_\_\_\_

**I hereby confirm that the above information is true and will remain the same for the 2023-2024 academic year.**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Family Member's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### ***AREA TO BE COMPLETED BY NOTARY PUBLIC***

State of West Virginia, County of \_\_\_\_\_

Notary's Official Seal:

The foregoing document was  
acknowledged before me on this date: \_\_\_\_\_

My commission expires: \_\_\_\_\_

Notary Public's Signature: \_\_\_\_\_