



Commuter Status Agreement 2025-26

For the approved commuter student:

Name (*please print*): _____ ID Number: _____

I accept permission to commute and hereby agree to the following:

1. I understand that I am approved to live at the primary residence of a parent or guardian as approved by the Office of Residence Life & Housing. The University does not accept responsibility for my choice of residence stated in this Agreement.
2. The University expects all students, whether living on or off campus, to conduct themselves in ways, which are consistent with University policy and the Heidelberg University Student Code. Violations of the Code on or off campus, may result in the University revoking my right to commute immediately. If this occurs, I acknowledge that I will be expected to move into campus residential facilities as directed by the Office of Residence Life & Housing.
3. In choosing to commute, I understand that I also subject myself directly to the standards of conduct expected by the community and the expectations of my parent/guardian and the civil authorities. Multiple complaints by neighbors of my off campus residence, citations by any local law enforcement agency to me or my guest(s), or reports of large, illegal parties at my off campus residence may also result in immediate revocation of my right to commute.
4. I recognize that it is important for the University to have on file in the Dean of Student Affairs Office a current housing address for me. I, therefore, agree to notify the Office of Residence Life & Housing of any changes in my off campus address by completing and returning a new agreement.
5. I understand that financial aid is based on campus costs, and the lower unit fee may require a downward adjustment in financial aid allocations.
6. I understand that I am required to live with the approved relative that I have listed on my application and that if the University finds that I am not residing in the provided residence, or with an approved parent or guardian, that my commuter status may be terminated. If my status is terminated, I may also be required to move back on campus and may be held responsible for all on campus charges for the entire academic year.

Generally, this Agreement will be in effect for the entire academic year. It may be reviewed and terminated, however, at any time by mutual agreement between the University and me. The appropriate University officials may terminate this agreement if an extraordinary number of vacancies occur in campus housing, or if it appears to be in the best interest of those involved to terminate, or for violation of any of the above terms. All information must be completed (including Primary address, phone number and signature of Parent/Guardian) before room and board charges will be reduced. By signing, I also acknowledge that I have received a copy of the Heidelberg University Good Neighbor Policy.

Signature of Student _____ Date _____

Permanent Address _____ Cell Phone _____

For the Parent/Guardian:

I understand and agree that my student will be residing in my primary residence with me and will commute to Heidelberg University.

Name (*please print*): _____ Signature: _____

Parent/Guardian Address _____

Parent/Guardian Phone _____ Parent/Guardian Email _____

Date _____