

## **Commuter Request Form**

Texas Baptist College students that live with their parent(s) or legal guardian(s) within 50 miles of Texas Baptist College may request an exemption from the Residence Hall requirement. Please complete this form and email a copy to <a href="mailto:campushousing@swbts.edu">campushousing@swbts.edu</a>.

|  |                |                      | Semester You are Applying as a |  |
|--|----------------|----------------------|--------------------------------|--|
| Student Name:  | 1              |                      | Commuter:                      |  |
|  |                |                      | High School                    |  |
| SWBTS ID:  | Date of Birth: |                      | Graduation Year:               |  |
| Phone Number:  | SWBTS E-Mail:  |                      |                                |  |
| Student Address:   |                |                      |                                |  |
| City:  | State:         |                      | Zip Code:                      |  |
| Parent/Legal Guardian Name:  |                | Relation to Student: |                                |  |
| Parent/Legal Guardian Address:   |                |                      |                                |  |
| Street:  |                |                      |                                |  |
| Street:  |                |                      |                                |  |
|  |                |                      |                                |  |
| City:  | State:         |                      | Zip Code:                      |  |
| COMMUTER EXEMPTION AGREEMENT   |                |                      |                                |  |
| The above named student is my child/legal ward appointed by a court, who will reside at my listed address      |                |                      |                                |  |
| while attending TBC. As an occupant of the above listed residence, they will commute to classes from this      |                |                      |                                |  |
| address. I declare that the information provided and any supporting documents are true and correct to the best |                |                      |                                |  |
| of our knowledge and understand that falsification of this official record may jeopardize the enrollment       |                |                      |                                |  |
| eligibility of the above named student and would result in fees. Submission of additional documentation may be |                |                      |                                |  |
| necessary to support the student's commuter exemption application.   |                |                      |                                |  |
| Please complete the section below in the presence of a notary public.  |                |                      |                                |  |
| reade complete the section scient in the presence of a notary passion  |                |                      |                                |  |
|  |                |                      |                                |  |
| Name of Parent or Legal Guardian (Please type or print)  |                |                      |                                |  |
|  |                |                      |                                |  |
|  |                |                      |                                |  |
| Signature of Parent or Legal Guardian  |                | Date (mm/dd/yyyy)    |                                |  |
|  |                |                      |                                |  |
|  |                |                      |                                |  |
| Signature of Student   |                |                      | Date (mm/dd/yyyy)              |  |
| Subscribed and sworn before me this  | day of         |                      | 20                             |  |
| Notary Public:   |                |                      |                                |  |
| My commission expires:   |                |                      |                                |  |

This completed form and any necessary additional documentation should be emailed to campushousing@swbts.edu for review. Students will be notified via SWBTS email upon approval or denial of exemption. If an exemption is granted, the student does not need to complete an additional application for subsequent terms of the same academic year.