OSWEGO
STATE UNIVERSITY OF NEW YORK

Residence Life
and Housing

Verification of Residence with Parent or Legal Guardian

This completed form is to be returned as an attachment to the student's *Request for University Housing Policy Exemption* or *Request for Release from the Housing and Dining License*. A properly completed *Request for University Housing Policy Exemption* or *Request for Release from the Housing and Dining License* must be submitted in the student's housing portal at myhousing.oswego.edu. Once all the necessary forms are received in our office a decision will be rendered. Please note that the parent or legal guardian signature must be witnessed and attested to by a Notary Public.

Student Information & Intention

Student Name _____

Student ID number _____

Parent or Guardian Information & Verification

Name _____ Phone _____

Address _____
Number & Street City & State Zip Code

My notarized signature below indicates my verification that I am the parent or legal guardian of the student named above and that they will be residing at and commuting exclusively to the University from my domicile for the _____ academic year(s). My signature further indicates my understanding that the University's approval of the student's *Request for University Housing Policy Exemption* or *Request for Release from the Housing and Dining License* is based on the condition that they live at my domicile for the approved academic year(s). Further, if the above student moves out of my domicile before completion of the academic year (for transfer students) or before the completion of two academic years (for first year students) I agree to promptly notify the Residence Life and Housing Office and understand that they will be required to move directly into University-owned housing.

_____ _____
Parent or Guardian Signature Notary Public Signature Date

Date _____