

MINOR GUEST APPLICATION

TO BE COMPLETED BY MINOR'S PARENT OR LEGAL GUARDIAN

Resident students wishing to sign in a guest(s) under the age of 18, and not accompanied by a parent or legal guardian, may do so only with the prior consent of the parent or legal guardian, and, subject to the approval the Director of Residence Life or designee. Upon approval the parent or legal guardian (only) will be issued a minor guest card which must be presented to the residence hall Security Desk staff by the minor at the time of their visit. Minors, 16 and older, must also bring a license, passport, school ID or other form of photo identification. The Minor Guest Card will be mailed to the parent or legal guardian or may be picked up by the parent or legal guardian in the Office of Residence Life and Housing, Corinne Hall Towers 100, during normal business hours. The Minor Guest Card will only be issued to the parent or guardian.

Name of Minor: _____ D.O.B: ____/____/____

Student Host: _____ Host's Phone: _____ Host's Hall & Room: _____

REQUESTED DATES OF VISIT (CHECK ONE):

- The following specific dates (no more than three in succession): _____
- Anytime accompanied by host during the current academic year.

I certify that I am the parent or legal guardian of the named minor listed above who is under 18 years of age, and that I give my consent for this individual to visit Framingham State University residence halls, under the supervision of the above student host during dates listed above.

I understand Framingham State University expects that all guests will abide by University policies as well as all local, State, and Federal laws. I have reviewed behavioral expectations with my son/daughter. Further, I understand that Framingham State University assumes no supervisory responsibilities for my son/daughter during the visitation period. Framingham State University residence halls are designed for occupancy by college students. Residence Hall policy allows for short term visits, not to exceed three nights, with friends, family, and/or acquaintances contingent upon approval of the host's roommate(s). Visitation privileges may be revoked at any time without notice. I, as the Parent/Guardian, agree to be available to pick up my son or daughter upon the request of the University or host student and to leave reliable contact information with the host student at which I may be reached in case of emergency.

Name of Parent or Legal Guardian: _____

Signature of Parent or Legal Guardian: _____ Date: ____/____/____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Telephone # where you can be reached in case of emergency: _____

HOW WOULD YOU LIKE TO RECEIVE YOUR MINOR GUEST CARD (CHECK ONE)?

(Cards are issued **ONLY** to parents/guardian.)

- Please mail the Minor Guest card to me (allow 5 days processing).
- I will pick up the Minor Guest card during normal business hours (allow 2 business days processing).

➔ Please Do Not Fax or E-Mail. Only Completed Original Applications Will Be Processed. ⬅

Administrative Use Only

Approved By: _____ Mailed Picked Up Date Issued: ____/____/____ Expiration Date: ____/____/____

Notes: _____