Underage Guest Request Form

DEPARTMENT OF RESIDENCE LIFE, 2450 Euclid Avenue. Euclid Commons 198. Cleveland, Ohio 44115 PHONE: (216) 687-5196 WEB: www.csuohio.edu/residence-life

Cleveland State University's guest policy for guests under the age of eighteen (18) requires written parental consent. Any guest under the age of eighteen (18) must be a family member of their resident host. The following information must be filled out by the guest's parent/guardian and submitted by the host to the Department of Residence Life at least two (2) business days in advance of the date of arrival. If the guest is arriving on a Saturday or Sunday, this form must be submitted by 5pm on the Wednesday prior to arrival.

If the request is approved, Residence Life will contact the host to pick up an Underage Guest Pass in the Residence Life office during business hours. No underage guest will be permitted to check in without an Underage Guest Pass.

DECIDENT INFORMATION

Signature of Resident Host

RESIDENT INFORMATION		
Resident (Host) Name:		Resident CSU ID Number:
Building (circle one): Euclid Commons	Fenn Tower	Room Number:
Resident Contact Phone Number:		
Resident Email Address:		
GUEST INFORMATION		
Guest Name:	Guest Da	ate of Birth (mm/dd/yy):
Guest Relation to Resident:		
Arrival Date and Time:		Departure Date and Time:
PARENT/GUARDIAN INFORMATION		
Parent/Guardian name:		
Parent/Guardian Signature:		Date:
Parent/Guardian Contact Phone Number: _		
Parent/Guardian Email Address:		
POLICY CONFIRMATION		
updated 2018-2019 Resident Handbook. I c	ertify that the above	State University's guest policy as outlined in the nformation is accurate and truthful. I understand that Resident Handbook and will result in disciplinary
		

Date

For Office Use Only		
Date Form Received:		
Verbal Parent/Guardian Confirmation Received:		
Staff Member Receiving Confirmation:		
Underage Guest Pass (circle one):		
Approved Denied		
Resident Host Contacted:		