

(Students who plan to commute must complete and sign this form, have it notarized and returned by the application deadline.)

State of _____ county of _____. The undersigned personally appeared before me, an officer, authorized by law to administer oaths, whom first being duly sworn, on oath deposes and says as follows:

1. My Name is (Ms.) (Mr.) _____ Social Security #: _____/_____/_____

2. Commuting Address _____ Phone (_____) _____

Mailing Address _____ Date of Birth ___/___/___

3. I am applying for admission to NGCSU for: ___ Fall 20___ ___ Spring 20___ ___ Summer 20___

4. (Please check one) ___ I am applying for admission to NGCSU and would like to attend as a commuting student.

___ I have applied for admission as a resident student and would like to have my current application changed to show that I would like to attend as a commuting student.

5. I want my application to show that I plan to be a: ___ military student ___ non-military student

6. I desire to attend NGCSU as a commuting student and certify that I meet one of the requirements indicated below.

All cadets must obtain the signature of the Commandant of Cadets (see below)

PLEASE CHECK ONE OF THE FOLLOWING THAT APPLIES TO YOU:

a. () Living With and Commuting Daily (within a 50 mile [25 miles for cadets] radius of Dahlonega) from the Legal Residence of:

() Parent Name (**parent must complete page two) _____

() Grandparent Name (**grandparent must complete page two) _____

() Legal Guardian Name (**guardian must complete page two) _____ (attach legal documents)

() Married and Living with Spouse (Spouse's Name) _____

b. () Completed 90 Semester Hours of Passing Work

c. () Over 23 Years of Age--(Date of Birth) _____/_____/_____

d. () Student Teaching or () NGCSU Internship

e. () Been Honorably Discharged After Two (2) Full Years of Active Military Service (Attach Copy of DD214)

f. () Six (6) hours or less of coursework for semester designated in #3.

g. () Associate's Degree Earned. When: _____ From: _____

7. () I do not meet any of the above requirements. I am requesting a waiver to the NGCSU residence policy.

(Attach your letter of appeal to the Chair of the Residence Policy Waiver Committee outlining the basis for your request).

8. I will advise the office of the Vice President and Dean of Student Affairs of any changes in the above listed address and of any changes within five days in my circumstances which will affect my authorization to attend NGCSU as a commuting student.

This AFFIDAVIT is given for the purpose of assisting officials of NGCSU in their determination of my eligibility to attend as a commuting student. **MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC.**

* _____

(AFFIANT – Student Must Sign)

*This AFFIANT should note before signing that any willfully false statements made herein will be considered an honor violation. Students found to be in violation of the policy will be suspended from the University for the remainder of the term in which the violation occurs, plus one additional term.

FOR NOTARY USE ONLY

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____, 20____

NOTARY PUBLIC Signature

Commission Expires

Students wishing to commute while in the Corps of Cadets must obtain the signature of the Commandant

Commandant of Cadets _____ Date _____

Approved _____ Disapproved _____ Date _____

Received _____ Additional paperwork (if applicable) sent _____ Notification _____

****If you have checked section 6a of the Commuter Affidavit, the parent or grandparent stated in section 6a must complete the Parental Certification of Student Commuter Status and have it notarized, before you return it with page one of the Commuter Affidavit.**

NGCSU Parental Certification of Student Commuter Status

THIS IS TO CERTIFY THAT _____ IS MY _____ AND WILL BE LIVING WITH ME AND COMMUTING DAILY TO NORTH GEORGIA COLLEGE AND STATE UNIVERSITY FROM MY PERMANENT RESIDENCE AT:

(ADDRESS)

(CITY)

(STATE)

(ZIP CODE)

SIGNATURE (must be signed in the presence of a notary public)

PRINT NAME

DATE

FOR NOTARY USE ONLY:

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____, 20____

NOTARY PUBLIC SIGNATURE

COMMISSION EXPIRES

Note: The student is required to notify the office of the Vice President and Dean of Student Affairs of any changes in circumstances or address within five days of the change. If the student has made any willfully false statements on the commuter affidavit, it will be considered an honor violation. Students found to be in violation of the policy will be suspended from the University for the remainder of the term in which the violation occurs, plus one additional term.

Commuter affidavits that are not completed or notarized will be returned to the applicant. Please return this completed and notarized Commuter Affidavit to:

If you do not plan to participate in the Corps of Cadets:
Office of Undergraduate Admissions
North Georgia College & State University
Dahlonega, GA 30597

If you plan to participate in the Corps of Cadets:
Cadet Recruitment Center
North Georgia College & State University
ATTN: Cadet Admissions
Dahlonega, GA 30597