

UNIVERSITY OF ILLINOIS
AT SPRINGFIELD

Department of Residence Life
Homer L. Butler Commons, Room 14
One University Plaza, MS HBC 1
Springfield, Illinois 62703-5407

UNDER 18 CONSENT FORM

If you are under the age of 18 and wish to sign a University Housing Contract for the academic year, you will need to obtain a co-signature from a parent or legal guardian. (This parent/guardian signature is void if the student chooses not to sign a contract).

If you plan to sign a University Housing Contract, contact you parent/guardian and ask them to complete the form below. **Your parent/guardian must sign below and mail or fax this to the Central Office of the Department of Residence Life at the address below.**

STUDENT'S LAST NAME

(Please Print)

STUDENT'S FIRST NAME

UNIVERSITY ID NUMBER (UIN)

Please indicate applied term:

- Fall
- Spring

Please indicate applied year: _____

SECTION FOR PARENTAL COSIGNATURE:

I certify that I have read and understood, and I hereby agree to be bound by the Terms and Conditions of the University Housing Contract. I agree to pay the academic year rate established by the Board of Trustees of the University of Illinois for the type of room and meal plan to which the above student is assigned.

PARENTAL SIGNATURE: _____ DATE: _____

Please fax or mail this signed page back to the Central Office of the Department of Residence Life.

Fax: 217-206-7821

Mail: Department of Residence Life
Homer L. Butler Commons
One University Plaza, MS HBC 1
Springfield, Illinois 62703-5407

Phone (217) 206-6190



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