



# Shapiro Campus Center Commuter Locker Request

Name: \_\_\_\_\_ Year of Graduation: \_\_\_\_\_

Email: \_\_\_\_\_

Student ID # (ID Card): \_\_\_\_\_

Local Address: \_\_\_\_\_

\_\_\_\_\_

Permanent Address: \_\_\_\_\_

\_\_\_\_\_

There is a \$15.00 deposit for use of the locker. The deposit will be returned when the key is returned.

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I, the undersigned commuter student, do hereby agree to the terms of this document:

I understand that the use of this commuter locker is a privilege extended by the Department of Student Activities, and I am responsible for the safe-keeping of this locker during the time it is lent to me. Additionally, I recognize that I must use this locker in accordance with Rights and Responsibilities, including a prohibition on keeping any drugs, weapons or other destructive materials in this locker, as well as any polices instituted by the Division of Student Affairs. I understand that any violations will be reported to the University Board on Student Conduct for possible disciplinary action. Furthermore, I understand that at the completion of my academic term I forfeit any materials left inside the locker. Failure to return the locker key will result in a lock change, using the deposit fee.

Signature:

Date:

**For Administrative Use**

DSA Approval (Initials)	
Date Approved	
Locker #	
Deposit Submitted Date:	
Key # Given:	
Key Return Date	