



DEPARTMENT OF RESIDENCE LIFE • WHITE HALL, LOWER LEVEL
300 POMPTON ROAD • WAYNE, NEW JERSEY 07470-2103
973.720.2714 FAX 973.720.2369 • WWW.WPUNJ.EDU

Please print clearly and fill out all information accurately and completely. Failure to obtain all signatures will result in your pass being denied. Please remember that residents of Overlook North and South, Hillside Hall, Century Hall, White Hall, High Mountain East and High Mountain West may have only one overnight guest per night. Residents of Pioneer Hall and Heritage Hall are limited to two overnight guests per apartment or two per room in Matelson Hall.

Your name: _____ **Building:** _____

Phone/Cell number: _____ **Room number:** _____

Guest information

Name: _____ **Age:** _____

Home address: _____ **City, State, Zip:** _____

Home telephone: _____ **License plate (State and #):** _____

Date(s) of visit: _____

Signatures

Do you have an active guest waiver completed?

_____ **If Yes, skip signature section**

_____ **If No, please attain signatures**

Roommate 1 _____ **Print Name**

_____ **Signature**

Roommate 2 _____ **Print Name**

_____ **Signature**

Suitemate 1 _____ **Print Name**

_____ **Signature**

Suitemate 2 _____ **Print Name**

_____ **Signature**

Suitemate 3 _____ **Print Name**

_____ **Signature**

Please note that forms submitted for guests Sunday – Thursday in Pioneer, Heritage and Matelson Halls **must be received by 8:00 pm** in order to be considered for approval, Friday – Saturday forms are due by 9:00pm. All other buildings forms may be returned to the hall office between the hours of **9:00 am – 9:00pm**, Sunday through Saturday.

Please be advised that you are responsible for the actions of your guests, and are subject to disciplinary action if your guest violates University regulations. Overnight guests must carry their pass at all times.

Host signature: _____

Below line for office use only

Approved _____

Denied _____

Reason _____

Staff Name _____

Date _____