

## Financial Aid Office 2025-2026 Housing Status Form

Student Name:	ID/SSN:
<u>e</u>	signed an initial Housing Status of "With may or may not affect your Financial Aid
<b>Instructions</b> : Please complete this form what was assigned. Select <b>only one</b> of th	•
☐ I live in off-campus housing	<b>g.</b> (OF)
I live at home with parent(s).	(HM)
Certification: I certify that the above inf	Formation is true and accurate.
Student signature:	Date:

Please return completed form to the Financial Aid Office or email it to finaid@asumidsouth.edu.