## 2014-2015

Student Financial Assistance

## HOUSING STATUS FORM

Name:	UCF ID/ PID:
Address:	Date:
City/State/Zip:	Phone #:
E-mail Address:	
Dear Student:	
Please confirm your Housing Status for the academic year of 2 your Student Budget.	014 -2015. This information is used to determine
Without your response, we will assume your housing status is "possible.	with parent," which is the lowest student budget
Sincerely,	
Office of Student Financial Assistance	
Select your Housing Status for the 2014-2015 academic year:	O I live with my parent(s)
	O I live in housing other than with my parent(s)
Student Signature	Date