

The cost of education used to determine financial need differs for various living arrangements. Please complete and return this form to the address above.

STUDENT NAME (please print)

Student ID Number (Dawg Tag)

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(Last)

(First)

(MI)

LOCAL ADDRESS WHILE ATTENDING SIU - if not known, leave blank
 (Street, City, State, Zip Code)

I certify my living arrangements for more than half of the indicated term of attendance at SIU are as follows:

IMPORTANT: check (✓) only one response in each column.

	Fall 2024	Spring 2025	Summer 2025
1. Live with parents	[]	[]	[]
2. Live in campus housing (not with parents)	[]	[]	[]
3. Live off-campus (not with parents)	[]	[]	[]

WARNING: This form is used in the process of establishing eligibility for federal financial student aid funds. You should know that intentionally false statements or misrepresentation may subject the filer to a fine or imprisonment, or both, under provisions of the United States Criminal Code.

I certify that all the information on this form is complete and correct.

Student Signature _____ Date _____

NOTE: Signatures must be handwritten. Computer fonts are not acceptable.

If you have questions, feel free to contact the Financial Aid Office. Mail form or submit using our secure document upload on www.fao.siu.edu