

HOUSING STATUS FORM

Name: _____	UCF ID: _____
Address: _____	Date: _____
City/State/Zip: _____	Phone #: _____
E-mail Address: _____	

Please confirm your Housing Status for the academic year of 2016 -2017. This information is used to determine your Student Budget.

Without your response, we will assume your housing status is "with parent," which is the lowest student budget possible.

- Select your Housing Status for the 2016-2017 academic year:
- I live with my parent(s)
 - I live in housing other than with my parent(s)

Student Signature

Date