HOUSING STATUS VERIFICATION FORM

☐ New student at the University  ☐ Continuing student at the University

___________________________________ _________________________
Student Name (Please Print)          Royal ID Number

In order to process your financial aid, this form must be completed to verify your housing status for the academic year. Please use the definitions below to complete the form:

Resident – living in a University of Scranton residence hall or University of Scranton owned off-campus building

Off-Campus – living away from parents’ home and not in a University owned building

Commuter – living at home with parents or with relatives

Please identify yourself as one of the above for each semester

Fall 2019 Semester ______________________  Spring 2020 Semester ______________________

If off-campus in either semester, you must complete the back of this form. Any mail generated by The University will still be sent to your MAILING address.

If you do not submit this form within 2 weeks, your aid will be processed as a COMMUTER student.

___________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

Student’s Signature ___________________________________________ Date ______________________

Please return Completed form to:
The University of Scranton
Office of Financial Aid
Scranton, PA 18510
Phone: 570-941-7701
Fax: 570-941-4370
Email: finaid@scranton.edu