Florida Atlantic University
Office of Student Financial Aid
Housing Status Revision Request – Budget Change
2015-2016 Academic Year

Boca Campus
777 Glades Road
Building SU 80, Room 233
Boca Raton, FL 33431-0991

Davie Campus
3200 College Avenue
Building LA 122
Davie, FL 33314

Jupiter Campus
Office of Financial Aid - SR 134
5353 Parkside Drive
Jupiter, FL 33458

Website: www.fau.edu/finance

Name: 
Address: 
FAU Z NUMBER Z
FAU Z NUMBER Z
TELEPHONE 
FAU EMAIL

IMPORTANT:

This form must be submitted with all required documentation to the Student Financial Aid Office by the following deadlines:

<table>
<thead>
<tr>
<th>To be processed for the term indicated below:</th>
<th>The form and required documentation must be submitted by</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall 2015</td>
<td>August 23, 2015</td>
</tr>
<tr>
<td>Spring 2016</td>
<td>January 10, 2016</td>
</tr>
<tr>
<td>Summer 2016</td>
<td>May 15, 2016</td>
</tr>
</tbody>
</table>

INSTRUCTIONS:

Select the option that describes your change in housing. Sign and submit this form to the Student Financial Aid Office. Note: The form must be accompanied by the appropriate documentation specified for the housing status indicated.

My housing plans for the 2015-2016 academic year have changed from what I originally indicated when I completed the Free Application for Federal Student Aid (FAFSA).

For the following semesters (check all that apply): □ Fall 2015 □ Spring 2016 □ Summer 2016

I will be living (check one):

□ On-Campus in a FAU residence hall or FAU apartment: a copy of FAU Housing Assignment or Letter from Housing documenting your on-campus housing status is required.

□ Off-campus without my parents or relatives: documentation (such as a lease or current monthly mortgage statement) that you are legally responsible for payment of off-campus housing charges is required. Note: rental agreements between student and parents/relatives normally do not qualify for off-campus housing assignment.

□ With parents or relatives.

By signing below, I certify that the information reported above is complete and correct:

Student Signature __________________________ Date ______________

FINANCIAL AID SECTION

Budget Adjustment Completed: □ Yes □ No □ Documentation Required

Counselor Signature __________________________ Date ______________

Revised 07/29/2015