

STATEMENT OF LIVING ARRANGEMENTS 2025-26

FINANCIAL AID OFFICE
STUDENT SERVICES BUILDING
MAIL CODE 4702
1263 LINCOLN DRIVE
CARBONDALE, IL 62901

618/453-4334

FAO.SIU.EDU

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 (plea	S	Student ID Number (Dawg Tag)		
(Last)	(First)	(MI)		
LOCAL ADDRESS WI	HILE ATTENDING SIU - if not k (Street, City, S	·		
				0.11
I certify my living arran	gements for more than half of the	indicated term of att	endance at SIU a	are as follows:
IMPORTANT: check (√) only <u>one</u> response in each co		. a : 2026	g 2026
		Fall 202	5 Spring 2026	Summer 2026
 Live with parents Live in campus house Live off-campus (not 	ng (not with parents) with parents)	[] []	[] []	[] []
funds. You should kno	n is used in the process of estable with a tintentionally false statent, or both, under provisions of the	nents or misreprese	ntation may sul	
I certify that all the info	ormation on this form is complete	e and correct.		
Student Signature	be handwritten. Computer fonts a	Date		
NOTE: Signatures must	be handwritten. Computer fonts a	re 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