

## 2020-2021 Housing Adjustment Request

Last Name	First Name	C ID# or SSN		
Free Application for Fe	orm if your housing status has e ederal Student Aid (FAFSA). Ye r current housing status as indi	ou must submit the requested s		
A: Current Housin	g Status (Check One)			
of Residence Life. Do	sidence hall): Our office will ver not complete section B. artment, rental home): <b>Comple</b>		with the Director	
Student Signature	Date			
B: Lease/Rental A	greement (Check One)			
	AGREEMENT with your name.	Attach a photocopy.		
	AGREEMENT with your name	e. Attach a photocopy.		
	<b>DRD STATEMENT:</b> If you are used to be a set of the set	•		
I,	declare	that		
Name of Landlord		Student N	Student Name	
Resides at				
Street		ity State	Zip Code	
And pays \$	per month for rent.			
		( )		
Landlord Signature	Date	e Telephone Numl	ber	
Notary Public:				
Sworn to (or affirme this day of	ed) before me			
	,			
Signature				

*Return to:* 1 Academic Drive, Corning, NY 14830 Financial Aid • Phone: (607) 962-9875 • Fax (607) 962-9019