

FWD to:

Reviewed & sent to scan by:

2019-2020



Financial Aid and Scholarships

Form 40 - FHOUSE

Financial Aid and Scholarships Office

5150 N. Maple Avenue, M/S JA 64

Fresno, CA 93740-8026

Phone: (559) 278-2182 Fax: (559) 278-4833

www.fresnostate.edu/studentaffairs/financialaid

### Housing Certification

STUDENT ID	STUDENT LAST NAME	STUDENT FIRST NAME	PHONE NUMBER (with area code)
PLEASE PRINT IN BLACK INK			

Please complete all fields below including the street address where you will be living while attending school.

*I certify that during the Fall 2019 – Spring 2020 semesters I will be living (check one):*

- With parents
- On campus dorms
- In other off-campus housing

#### CERTIFICATION & SIGNATURE(S)

**By signing this form, I certify that all the information reported on it is complete and correct.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**WARNING:** If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.

#### OFFICE USE ONLY

- |   |   |   |   |  |   |   |
|---|---|---|---|--|---|---|
| <input type="checkbox"/> VERIFICATION INCOMPLETE: | <input type="checkbox"/> Not Checked out          | <input type="checkbox"/> Complete Checklist | <input type="checkbox"/> Comment            | <input type="checkbox"/> Sent to: Scanning | Counselor                                   |   |
| <input type="checkbox"/> REVISED:                 | <input type="checkbox"/> FAFSA                    | <input type="checkbox"/> Budget             | <input type="checkbox"/> Award              | <input type="checkbox"/> Comment           | <input type="checkbox"/> Complete Checklist | <input type="checkbox"/> Sent to Scanning |
| <input type="checkbox"/> REVISED FAFSA:           | <input type="checkbox"/> ISIR selected for review | <input type="checkbox"/> Checked out        | <input type="checkbox"/> Complete Checklist | <input type="checkbox"/> Sent to Scanning  |   |   |

Comments: \_\_\_\_\_ Date \_\_\_\_\_ By \_\_\_\_\_