CHAMPLAIN COLLEGE

OFFICE OF FINANCIAL AID 163 South Willard Street PO Box 670 Burlington, Vermont 05402

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2023-24 STUDENT HOUSING STATUS FORM

STUDENT INFORMATION (PLEASE PRINT)			
LAST NAME	FIRST NAME		CHAMPLAIN COLLEGE ID NUMBER
ADDRESS			DATE OF BIRTH
CITY	STATE	ZIPCODE	TELEPHONE NUMBER (INCLUDE AREA CODE)
	7023 24 Free Application for Fo		(FAFSA) you answered yes to one of the
1. A y h 2. A p u 3. A	At any time on or after July 1, 202. You were an unaccompanied youth nomeless? At any time on or after July 1, 202. Program funded by the U.S. Departuaccompanied youth who was how any time on or after July 1, 202.	2, did your high sch who was homeless 2, did the director of trent of Housing a meless or were self 2, did the director of the that you were an	ool or school district homeless liaison determine that or were self-supporting and at risk of being f an emergency shelter or transitional housing and Urban Development determine that you were an supporting and at risk of being homeless? If a runaway or homeless youth basic center or a unaccompanied youth who was homeless or were
I,	, certify that I completed the FAFSA correctly in answering yes to		
	ne questions listed above. T'S SIGNATURE		 DATE

If you answered one of the above questions in error, please contact the Office of Financial Aid for additional instructions on how to make the necessary corrections to your 2023-24 FAFSA.



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