

Financial Aid Office

1032 West Sheridan Road
Sullivan Center Room 190
Chicago, Illinois 60660
Phone: 773.508.7704

Scan completed form and upload to <https://forms.luc.edu/faupload>



Preparing people to lead extraordinary lives

2024–2025 Change in Living Arrangement

Student Name: _____
(Please print)

Loyola ID: _____
(Your 11-digit Loyola ID number begins 0000)

I authorize the Financial Aid Office to change my living arrangement and revise my cost of attendance and financial aid award, if necessary.

For the 2024–2025 academic year, I will be living:

- On Campus
- Off Campus/Apartment
- At Home/Commuting

For the 2024–2025 academic year, I will be a:

- Freshman*
- Sophomore*
- Junior
- Senior
- Graduate

*All full-time first-year and second-year students are required to live in Loyola University Chicago housing and purchase a meal plan. Submission of this form does not exempt a student from this requirement. For more information regarding this policy and to request an exemption, please visit the Residence Life website at <http://www.luc.edu/reslife/about/residencyrequirement/>

Certification Statement:

All of the information provided on this form is accurate and complete to the best of my knowledge. If requested, we agree to give proof of the information provided on this form. Proof may include court documents, canceled checks, copy of a lease, etc. Failure to provide the requested information will result in denial of the appeal.

Student Signature*

Date

**Typed and digital signatures are not acceptable*