

Student Name: _____

Banner ID#: 800 _____

2024/25 – S32a



**SUNY
BROCKPORT**

Please indicate your housing plan by checking the appropriate response below and return to the Financial Aid Office

1. With parents or relative(s) other than spouse: _____

2. On campus: Residence Hall _____

or

Town-home _____

3. Off campus, not with parents or relative(s) other than spouse: _____

Please provide off campus address: _____

4. Attending overseas program or internship: _____

Student Signature: _____ Date: _____

S32a (5/7/24)