

2026 - 2027**HOUSING STATUS CHANGE FORM**

1600 South College Street, Mountain Home, AR 72653 • Phone: 870-508-6100



Student's Last Name	Student's First Name	Middle Initial	Banner ID Number:
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GENERAL INFORMATION

Financial Aid offers are partially based on your housing status (where you live) which is a component of your **Cost of Attendance** (COA). The COA provides a limit to how much aid a student may receive in various types of aid. The 2026-2027 FAFSA no longer collects a student's housing status, therefore we must make determinations to build your COA. Your housing may be based upon your prior year's housing status, or a question added to the admissions application that you answered. Without these inputs the default we assume is that you are living with your parents. Students living with their parent(s) generally have a lower COA and thus could receive less assistance. The types of assistance that could be reduced are typically loans, but in rare cases where someone receives a lot of scholarships, assistance from ASUMH or the state of Arkansas may be reduced due to stacking policies relating to the Cost of Attendance.

Scan the QR code or follow the link to learn more about the COA.



<https://studentaid.gov/help-center/answers/article/what-does-cost-of-attendance-mean>

ASUMH has two separate housing categories. They are LIVING WITH PARENT and LIVING OFF CAMPUS. To request a reevaluation of your COA, complete and sign the statement below. Completing this form is NOT a requirement. Completing this form is entirely at the student's discretion.

If your housing has already been determined to be what you have indicated below, there will be no changes made. This request may or may not result in a change in the assistance offered even if your Cost of Attendance is adjusted.

HOUSING STATEMENT

Check the box below that best describes your housing situation.

- ☐ I am living with a parent who is responsible for covering my housing costs. [LIVING WITH PARENT]
- ☐ I am NOT living with a parent that is responsible for covering my housing costs, and I am responsible for my own housing costs. [LIVING OFF CAMPUS]

Student's Signature: _____ Date: _____

Return this completed form to the ASUMH Financial Aid Office or email the completed and signed form to financialaid@asumh.edu.