



VILLANOVA
UNIVERSITY

**VERIFICATION OF OFF CAMPUS ADDRESS
FOR THE PENNSYLVANIA STATE GRANT PROGRAM**

Office of Financial Assistance
Villanova University • 800 Lancaster Avenue • Villanova, PA 19085-1685
Phone: (610) 519-4010 Fax: (610) 519-7599
Email: finaid@villanova.edu Website: www.finaid.villanova.edu

The Pennsylvania Higher Education Association Agency (PHEAA) requires that schools of higher education document the address of students who will **NOT** be residing in the school's on-campus housing.

You have indicated that you will be either living off campus or living with a parent/relative on the Villanova University Institutional Application for Financial Assistance and the Free Application for Federal Student Aid (FAFSA).

In order to help determine your Pennsylvania State Grant eligibility, please complete the following information. The PHEAA State Grant will not be credited to your account without this document. Complete and return to the Office of Financial Assistance.

Name: _____ Villanova University Student ID: _____

Check the appropriate box indicating your living status:
(Check only one housing choice for each term.)

	Summer 2009	Fall 2009	Spring 2010
1. Off-Campus — living away from parent(s)' home and NOT in campus housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

My off-campus address is (this cannot be your parent's address):

My telephone number is _____

2. Commuter — living with parent(s) or relative(s) other than parent(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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3. **Other** — Please explain: _____

Please complete, sign, date, and return to the Villanova University Office of Financial Assistance.

Student's Signature: _____ Date: _____