LANDER UNIVERSITY

Office of Financial Aid
Phone: 864-388-8340 | Fax: 864-388-8811 | Form Code 27HOUS
320 Stanley Avenue, Greenwood, SC 29649 | lander.edu/finaid | Email: finaid@lander.edu

2026-2027 Change in Housing Status

Student's Last Name **First Name** **MI** **Lander ID (L#)**

The Financial Aid Office packages financial aid based on your housing plans for the academic year. **Please select your anticipated housing status for the academic year from the options below:**

FALL TERM	SPRING TERM
○ 1 - WITH PARENT ○ 2 – ON CAMPUS/LANDER HOUSING ○ 3 – OFF CAMPUS (NOT WITH PARENT/RELATIVE AND NOT IN LANDER HOUSING) ○ 4 – WITH RELATIVE	○ 1 - WITH PARENT ○ 2 – ON CAMPUS/LANDER HOUSING ○ 3 – OFF CAMPUS (NOT WITH PARENT/RELATIVE AND NOT IN LANDER HOUSING) ○ 4 – WITH RELATIVE

CERTIFICATION STATEMENT AND SIGNATURE:

The information provided above is complete and accurate to the best of my knowledge. I understand that it might be necessary for the Financial Aid Office to adjust my aid eligibility based on my level of enrollment. I understand that at any time the Financial Aid Office adjusts my aid eligibility, I will be notified of the revised awards. ***I understand that it is my responsibility to notify the Financial Aid Office if my housing plans change.***

I also understand I am responsible for contacting Housing for any change in campus housing contracts.

Student's Signature **Phone #** **Date**

DATA ENTRY		COUNSELOR REVIEW		
RRAAREQ	xxHOUS = N	ROAUSDF FIELDS 121-123	RHACOMM	FWD TO LOAN CNSLR?
Initials/date		ROASTAT HOUSING PLANS (not a CORRP)	ROAMESG	
Fwd to Counselor date		RBAABUD - update and lock	RRAAREQ	
(note: xxHOUP is online Banner form)		RPAAWRD adjustments? OVER COA/OVER NEED/FUND cancellation	ROAIMMP DISB	