



## Affidavit of Homeless Status For Tuition-Fee Exemption

Student Name:  Emplid:

Phone:  Email:

**Please answer the following questions:**

Where are you currently residing?  
 \_\_\_\_\_  
 \_\_\_\_\_

*Note: If you are staying at a shelter, please attach a letter from the shelter verifying your stay. The letter should include contact information in case additional information is needed to process your application.*

How long have you resided at this location?  
 \_\_\_\_\_

How long can you remain at this location?  
 \_\_\_\_\_

Are you allowed to keep your belongings at this location? Yes No

Do you pay rent? Yes No      Do you pay utilities? Yes No

**By signing below I certify that:**

1. I have completed this form truthfully and to the best of my knowledge.
2. I am a homeless student as defined by the FL Board of Governors Regulation 7.008-11, who "lacks a fixed, regular, and adequate nighttime residence, excluding university housing, or whose primary nighttime residence is a public or private shelter designed to provide temporary residence for individuals intended to be institutionalized, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings."
3. I understand that application for this fee exemption is semester-specific. I must apply for the fee exemption each semester and if my application is approved, any fee exemption is valid only for the single semester approved.
4. If I am staying in a shelter, I give my permission for any such agency or shelter to provide any and all information concerning my housing and financial status to Florida State University.

Student Signature       Date