



SAN DIEGO CITY FINANCIAL AID
1313 Park Blvd, San Diego CA 92101,
619-388-3501
Cityaid@sdccd.edu

2026 - 2027 Request for Change in Housing Type

STUDENT INFORMATION		
1. Last Name	2. First Name	3. Student ID#
4. Email	5. Phone #	6. Date of Birth

Whether living with Parents or Other, please fill out Parent Name and Address	
During the Academic Year, I will live with: <input type="checkbox"/> Parent <input type="checkbox"/> Other	
Parent(s) Name:	
Parent(s) Address:	
10. Student Signature:	11. Date:

Signing this form certifies that the information reported is complete and correct and that any false statement or failure to provide proof when asked may be cause for delay, denial, reduction or withdrawal of financial aid. **Warning: purposely giving false and/or misleading information may be cause for a fine, sentence to jail or both.**

The San Diego Community College District is committed to a safe and equitable learning environment for all students and employees. It does not discriminate on the basis of sex or gender in its educational programs and employment. Please refer to the SDCCD Board Policy 3410: NONDISCRIMINATION at the link below.

For details and contact information:
<https://www.sdccd.edu/students/titleix/>
SDCCD Board Policy 3410

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