



Family & Graduate Housing Office
1502 W. Garfield
Bozeman, MT 59715
Telephone (406) 994-3730
Fax (406) 994-3920

Student Verification Form

Date: _____

Name of Current Student: _____

GID #: _____

Address: _____

Phone Number: _____

Name of New Student: _____

GID #: _____

New Status: (please circle) Graduate Undergraduate Other _____

Number of Dependents: _____

This form is to verify that I will be the full-time student (or faculty/staff/research assistant/post-doctorate) in the above unit until I notify the Family & Graduate Housing Office otherwise. My spouse will no longer be the student (or faculty/staff/research assistant/post-doctorate) listed on our contract. I realize I have to take five (5) graduate credits, nine (9) undergraduate credits, or be employed by the University to remain eligible for Family & Graduate Housing.

If there are further changes, I will notify the Family & Graduate Housing Office immediately.

Tenant's Signature: _____