WCU
WEST CHESTER UNIVERSITY

Veterans Center
624 S. High Street
West Chester, Pennsylvania 19383

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Fax: 610-738-0587
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2020-21 VETERAN OR SPOUSE/DEPENDENT OF VETERAN HOUSING INFORMATION

Name (Print) _____

WCU ID # _____

For: ☐ Fall 2020 and/or ☐ Spring 2021
(*Check both for whole year.*)

I will be living:

☐ On campus
☐ Affiliated Housing (USH) – Allegheny Hall, Brandywine Hall, University Hall, Commonwealth Hall, or The Village
☐ Traditional Housing (Residence Life) - Goshen Hall, Killinger Hall, Schmidt Hall, or Tyson Hall
☐ With parents or relatives other than spouse
☐ Off campus (not with parents or relatives other than spouse) at:

_____
Street Address

_____
City **State** **Zip Code**

_____
Telephone Number

Signature_____ **Date** _____

FOR OFFICE USE ONLY:
Housing Status Reviewed by_____

Local address updated on PS_____