

PETITION FOR DETERMINATION OF RESIDENCY STATUS

This application and supporting documents must be filed within 30 school days from the start of the term in question, or you will lose all rights to change of status and adjustment of the tuition assessed.

I am applying for: fall spring summer Year: 20

Student ID _____

1. Name _____
Last First MI Phone Number

2. Permanent Address _____
Street City State Zip Code

3. Local Address _____
(if different from above) Street City State Zip Code

4. Date of Birth ____/____/____ (Month/Date/Year) Place of Birth _____

5. Name and Address of Parent or Guardian _____
Name Street
City State Zip Code

How long has parent or guardian resided there? _____

6. Are you married? Yes No If Yes: Is your spouse an Illinois resident? Yes No
Is your spouse a student at GSU? Yes No Name of Spouse _____ ID No _____

7. Are you a U.S. Citizen? Yes No
If not, are you a permanent resident? Yes No If yes, provide a copy of front and back permanent resident card
If not a PR, do you hold a visa? Yes No Visa Type _____

8. Indicate below, in chronological order where and how you have spent your time for the six months immediately preceding the date of this application. Give specific dates. **You must submit an apartment lease, property deed, or housing contract as evidence of (1) maintenance of a permanent address in Illinois for a period of at least six consecutive months immediately preceding the beginning of the term for which you are registering and (2) continued maintenance of a bona fide residence in Illinois.**

Date	City and Sate	What were you doing?	Employer's name/address
From to			
From to			
From to			

9. Do you operate a car in Illinois? Yes No Do you own a car? Yes No
In what state is your car registered? _____ Attach a copy of vehicle registration.

10. In what state is your drivers license issued? _____ Date of Issuance _____
Drivers License Number _____ Attach a copy of Drivers License.

11. Are you registered to vote? Yes No If yes, attach a copy of voter card.

12. Are you employed in Illinois? Yes No If yes, you may wish to attach copies of pay stubs verifying that employment was in Illinois.

13. Are you financially independent? Yes No Attach any explanation.

14. State designated as your home on your last federal tax return _____

15. Are you actively serving in the Armed Forces of the U.S.? Yes No

a. If yes, are you stationed in Illinois in connection with that service? Yes No

b. If yes, but you are stationed outside of Illinois, were you a resident of Illinois when you entered the service? Yes No

c. Attach a copy of orders.

16. Are you separated from active military status? Yes No

a. If yes, were you a resident of Illinois at the time of enlistment? Yes No

b. Attach a copy of DD214.

17. Have your parents been transferred, by their employer, to a location outside the U.S.? Yes No

a. If yes, did they reside in Illinois for at least six consecutive months immediately prior to the transfer? Yes No

b. If yes, on what date were they transferred? _____

18. Is your spouse or parent a University employee (faculty, staff or graduate assistant)? Yes No

19. On a separate sheet, briefly indicate the reasons other than University attendance that have led you to seek establishment of Illinois residency and the actions you plan to maintain that residency. Responses must be typed.

Attach any additional information which you believe may be relevant to your classification as an Illinois resident. You may be asked to provide additional documentation.

Affidavit (Sworn Statement)

The applicant must sign and have the correctness of his/her answers sworn in the presence of a Notary Public. Being duly sworn on oath, applicant states that the answers to the forgoing questions are true and correct.

Applicants Signature

State of Illinois
County of _____

Subscribed and sworn before me this _____ day of _____, 20_____.

Notary Public

Do not write below this line. (For office use only)

Final Action Approved Denied Date _____ By: _____

Notes _____