



REQUEST FOR IN-DISTRICT TUITION

This form may be applicable for an out-of-district/out-of-state student who has established a permanent residence in Jefferson County. Note: Viking Woods student housing is not considered a permanent address.

Name (Please Print): _____ Date of Birth: _____

Student Number: _____ Telephone: _____

Out-of-District Address: _____

In-District Address: _____

Check the appropriate box below:

- I graduated from a Jefferson County high school.
Name of high school and graduation date: _____
- I am a dependent student whose parents have established residency in Jefferson County.
Initial date of residency: _____
- I am an independent and self-supporting student who has established residency in Jefferson County. Initial date of residency: _____

Provide copies of at least three of the following:

- Driver's license showing your current Jefferson County address;
- Voter's Registration card for Jefferson County;
- Copy of Veteran's Administration DD214 showing that you are a military veteran or a member of a National Guard unit;
- Parents' income tax return for previous year showing that they did not claim you on income tax (required for students less than 20 years of age);
- Rent receipt or mortgage payment records showing that you lived in Jefferson County prior to enrollment at Jefferson College;
- Judge's decree showing that you are a ward of the court; or
- Other evidence: _____

Please submit the form and supportive documentation via email to register@jeffco.edu or in-person to the Registrar's attention at the Enrollment Services counter located on the first floor of the Student Center building.

I certify that the above information is true. I give the Jefferson College Registrar, or their designee, permission to contact those persons who can support my claim of residency. I understand that in order for my tuition to be reassessed for a semester, this form and the required documentation must be submitted prior to the start of that semester.

Student Signature _____ Date _____

FOR OFFICE USE ONLY

Approved or Denied: Term/Year Effective: _____ Date Reassessed: _____

Registrar Signature Date