

REQUEST FOR IN-STATE STATUS

(If establishing Jefferson County residency, please use the **Request for In-District Status** form.)

Name (Please Print):	Date of Birth:
Student Number:	Telephone:
Out-of-State Address:	
In-State Address:	
Check the appropriate box below:	
I am a dependent student whose parents hav Initial date of residency:	
I am an independent and self-supporting stud Initial date of residency:	ent who has established residency in Missouri.
Provide copies of at least three of the following:	
☐ Driver's license showing Missouri address;	
☐ Voter's Registration card for Missouri;	
 Copy of Veteran's Administration DD214 shows a National Guard unit; 	wing that you are a military veteran or a member of
 Parents' income tax return for previous years (required for students less than 20 years of a 	showing that they did not claim you on income tax ge);
 Rent receipt or mortgage payment records sh at Jefferson College; 	owing that you lived in Missouri prior to enrollment
Judge's decree showing that you are a ward ofOther evidence:	
I certify that all of the above information is true, and I give the Vice President of Student Services (or his/her designee) for Jefferson College authorization to contact those persons who can support my claim of residency. I understand that this form and the required documentation must be submitted prior to the start of a semester in order for that semester's tuition charges to be reassessed.	
Student Signature	Date
FOR OFFICE USE ONLY	
Request Approved	Request Denied
Semester/Year Effective:	•
Date Tuition Reassessed:	
Vice President of Student Services Signature	Date