Residency Form 2021-2022

Name ____________________________________  Student or STAR ID ___________________________
Phone ____________________________________  Email _________________________________________

In order to determine your residency for financial aid eligibility, please answer the following questions. (If additional space is needed, please use the reverse side of this form).

1. By July 1, 2021, will you have received a High School diploma?
   - Yes □ No □
   If no, please skip to question 2. If yes, please complete the following:
   Name of High School ___________________________  State ___  Month/Year __________

2. By July 1, 2021, will you have received a GED (high school equivalency certificate)?
   - Yes □ No □
   If yes, please complete the following:
   State ___  Month/Year __________

3. By July 1, 2021, will you have attended more than 4 years of education PAST high school? □ Yes □ No

4. Have you lived in Minnesota your entire life? □ Yes (Skip to question #7)  □ No (Continue below)

5. Indicate each state that you have lived in and the time period you lived in those states. (Use back of form if necessary).

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<thead>
<tr>
<th>State</th>
<th>From (MM/DD/YY)</th>
<th>To (MM/DD/YY)</th>
<th>State</th>
<th>From (MM/DD/YY)</th>
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6. Indicate the date you moved to Minnesota ________________________________

7. Indicate any colleges you attended after high school graduation and the dates attended.

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<th>College</th>
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I CERTIFY THE ABOVE RESPONSES ARE CORRECT.

Student Signature ___________________________  Date ___________________________

Return by mail, fax or email:

Faribault Campus:
South Central College
Financial Aid Office
1225 Third Street SW
Faribault, MN 55021

North Mankato Campus:
South Central College
Financial Aid Office
1920 Lee Boulevard
North Mankato, MN 56003

Fax: (507) 389-7419  Email: financialaid@southcentral.edu