East Georgia State College
Office of the Registrar

Residency Classification Correction Form
(corrections to the petition only)

PERSONAL INFORMATION FOR EAST GEORGIA STATE COLLEGE STUDENT

Student Name
First    Middle      Last

Present Address _____________________________________ ______________________________________________
Street address and, if applicable, apartment number City State Zip Code

Email Address ______________________________________ _______________________________________________

Student ID Number                                                                                  Phone Number ________________________________

Semester Applying For _____________________________ _________________________________________________
Fall / Spring / Summer   Year

STUDENT CORRECTION TO RESIDENCY ANSWER ON ORIGINAL ENROLLMENT APPLICATION

I completed the Enrollment Application incorrectly for tuition classification purposes and wish to correct the following information (students must provide copies of documentation supporting their selected revision(s) below and attach it to this form).

1. According to the definitions above, have you established and maintained legal residency and domicile in Georgia for at least 12 consecutive months immediately preceding the first day of classes for the term in which you plan to enroll? ________________

2. If you are under the age of 24, has a parent(s) or U.S. court-appointed legal guardian established and maintained legal residency and domicile (according to the definitions above) in Georgia for at least 12 consecutive months? ________________

3. What is your Georgia County of residence? ____________ Years:_____ Months:_____ Date from:__________ To: __________

4. Have you ever lived outside the state of Georgia? ______. If you have lived outside of the state of Georgia, what was your primary reason for moving to the state? _________________________________________________________________

5. Should you wish to elaborate on why you moved to Georgia, please use a separate page to record your reason

6. Have you attended a Georgia high school for at least one year? _____ Have you graduated, or will you graduate from a Georgia high school? ________________

7. Do you have a driver’s license or state-issued ID? _____. If yes, in which U.S. state/territory was it issued? ________________

8. Do you own a motor vehicle? _____. If yes, in which U.S. state/territory is it registered? __

9. Do you have voter registration? ______. If yes, in which U.S. state/territory are you registered? ______

10. Did you and your parents file a state income tax return in the past year? ______ If yes, in which U.S. state/territory did you file? ________________

11. Are you currently active duty military or a family member of someone who is active duty military? ______

12. Are you currently a member of the Georgia National Guard or a family member of someone who is a member of the Georgia National Guard? ______ Home state of record:__________

We will review your information and notify you in writing with our decision concerning your tuition classification.

OATH AND AFFIRMATION FOR EAST GEORGIA STATE COLLEGE STUDENT– (you must sign below in the presence of a Notary Public)

I, the undersigned, hereby swear or affirm to the authenticity of the information provided on all pages of this affidavit. I understand that any false or misleading information on this affidavit or provided to support this affidavit may result in denial of admission or expulsion from the Institute. I understand that it may also cause me to be billed for the nonresident fees. I also authorize East Georgia State College to review or examine any and all documents and records, including my confidential loan forms and related data, which may assist in clarifying my residence status.

Signature Of Person Making Affidavit – (EGSC Student) _____________________________________________________
Subscribed And Sworn To Before Me This Day of ____________ 20 ____________
☐ Personally Known    ☐Produced Identification Type ____________ ID Number ________________
Notary Public, State of Georgia Commission Expires ________________________

ADDITIONAL INSTRUCTIONS
Correction Form must be submitted one week prior to the first day of classes.

This request for correction of information does not in any way imply a determination of legal residence in Georgia. You may be required to pay out-of-state fees if a decision has not been reached prior to the fee payment deadline to prevent cancellation of your classes. You will then be due a refund if you are determined to be a legal resident of Georgia.

Submit To: Office of the Registrar
            East Georgia State College
            131 College Circle
            Swainsboro, GA 30401

<table>
<thead>
<tr>
<th>Decision:</th>
<th>Signature:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Approved</td>
<td>□ Denied</td>
<td></td>
</tr>
</tbody>
</table>

Semester: ______________________

Fall / Spring / Summer

Year

Revised 5/2012