



Residency Correction Form

East Georgia State College
131 College Circle, Swainsboro, GA 30401
Email to: documents@ega.edu
(478) 289-2169 Phone (478) 289-2353 FAX

Your initial tuition classification was determined by the information provided on your admissions application. The Residency Correction Form can be completed if you feel the decision was based on incomplete information. This form must be submitted to the Office of Admissions no later than 5 days after the start of the semester. Failure to do so will result in non-resident classification for the semester.

PERSONAL INFORMATION FOR EAST GEORGIA STATE COLLEGE STUDENT

Student ID/SS# Birth Date / / Student Name Last First Middle Maiden/Former Name Mailing Address PO Box/Street/Apt Number City State Zip Code Email Address Phone Number: Semester Attending Fall / Spring / Summer Year

CORRECTION TO RESIDENCY ANSWERS ON ORIGINAL ENROLLMENT APPLICATION

What is your citizenship status? [] US born or Naturalized Citizen [] Non-Resident Alien (VISA/Asylee/Refugee) [] Legal Permanent Resident (Green Card) [] Undocumented/DACA
Are you applying for in-state tuition? [] Yes [] No
If "Yes", how long have you have you resided in Georgia? _____ Years _____ Months
What is your Georgia COUNTY of residence? _____
1. Are you currently or have you ever been a ward of the State of Georgia? [] Yes [] No If "Yes", what is your home state of residence? _____
2. Are you an unaccompanied youth? [] Yes [] No If "Yes", what is your home state of residence? _____
3. Are you the spouse of a Georgia resident who has established residency in Georgia for at least 12 months and has demonstrated financial independence, and is entitled to claim you as an exception for state and federal tax purposes? [] Yes [] No
4. Have you ever lived in another country or in any US state/territory other than the state of Georgia? [] Yes [] No
If "Yes", what was your primary reason for moving to the state? _____
5. Will you graduate, or have you already graduated, from a Georgia high school? [] Yes [] No If "Yes", year of Graduation? _____
6. Do you have a driver's license or state-issued ID? [] Yes [] No If "Yes", in which U.S. state is it issued? _____
7. Do you have voter registration? [] Yes [] No If "Yes", in which U.S. state are you registered? _____
8. Did you file a STATE income tax return in the past year? [] Yes [] No [] Did not file If "Yes", in which U.S. state did you file? _____
9. Did you file a FEDERAL income tax return in the past year? [] Yes [] No [] Did not file
If you are UNDER the age of 24:
1. Has your parent(s) or U.S. court-appointed legal guardian established and maintained legal residency and domicile in Georgia for at least 12 consecutive months prior to the beginning of your term of entry? [] Yes [] No
If "Yes", how long has your parent/guardian resided in Georgia? _____ Years _____ Months
What is your parent/guardian's Georgia county of residence? _____
2. Has your parent /guardian ever lived in another country or in any US state/territory other than the state of Georgia? [] Yes [] No
If "Yes", they have continuously lived in Georgia since: _____
3. Does your parent/guardian have a driver's license or state-issued ID? [] Yes [] No If "Yes", in which U.S. state was it issued? _____
4. Does your parent/guardian own a motor vehicle? [] Yes [] No If "Yes", in which U.S. state is it registered? _____
5. Does your parent or US appointed legal guardian have voter registration? [] Yes [] No If "Yes", in which U.S. state are they registered? _____
6. Were you claimed as a dependent on your parent's/guardian's STATE income tax return in the past year? [] Yes [] No [] Did Not File
If "Yes", in which U.S. state did this parent or US appointed legal guardian file their STATE income tax return in the past year? _____
7. Did someone else claim you as a dependent on their STATE income tax return in the past year? [] Yes [] No
If "Yes", in which U.S. state did they file? _____

8. Were you claimed as a dependent on your parent's/guardian's FEDERAL income tax return in the past year? Yes No Did Not File
9. Did your parent(s) or U.S. court-appointed legal guardian provide you with any financial support in the last year? Yes No
10. Are you currently a family member of someone who is active duty military? Yes No
11. Are you currently a family member of someone who is a member of the Georgia National Guard? Yes No
 What is their home state of record: _____

If you are **OVER** the age of 24, please answer the following:

12. Have you established and maintained legal residency and domicile in Georgia for at least 12 consecutive months prior to the beginning of your term of entry? Yes No
 If "Yes", how long have you have you resided in Georgia? _____ Years _____ Months
 What is your Georgia County of residence? _____
 If "No", what is your home state of residence? _____
13. Have you ever lived outside the state of Georgia? Yes No
 If "Yes", what was your primary reason for moving to the state? _____
14. Will you graduate, or have you already graduated, from a Georgia high school? Yes No If "Yes", year of Graduation? _____
15. Do you have a driver's license or state-issued ID? Yes No If "Yes", in which U.S. state/territory was it issued? _____
16. Do you own/lease a motor vehicle? Yes No If "Yes", in which U.S. state/territory is it registered? _____
17. Do you have voter registration? Yes No If "Yes", in which U.S. state/territory are you registered? _____
18. Did you file a STATE income tax return in the past year? Yes No Did Not File
 If "Yes", in which U.S. state did you file? _____
19. Did you file a FEDERAL income tax return in the past year? Yes No Did Not File
20. Are you currently active duty military or a family member of someone who is active duty military? Yes No
21. 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?
 Yes No What is your home state of record: _____

OATH AND AFFIRMATION FOR EAST GEORGIA STATE COLLEGE STUDENT

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: _____

Date: _____