South Georgia State College APPLICATION FOR OUT-OF-STATE TUITION DIFFERENTIAL WAIVER BORDER STATE RESIDENTS

Prior to submitting a **Border State Residents** out-of-state tuition waiver application, students are advised to review the University System of Georgia Border Residents out-of-state tuition waiver policy found in <u>Section 7.3.4.1 of the Board Policy Manual</u> and the <u>list of approved</u> institutions, border states, and border counties. Please note that the Border State Residents out-of-state tuition waiver is available to qualifying undergraduate students only.

Section I – To be completed by all stu	dents				
1. Your Name (Last, First, MI):			2. Student ID:		
3. Home Phone:	4. Cell Phone:		5. Work Phone:		
6. Email Address:					
7. Present Address:					
8. Permanent Address:					
9. Term you are Image: Fall requesting to first Year: receive the waiver: Year:	Spring Sun	mmer	10. Student Level:	UndergraduateGraduate	
11. Will you be 24 years of age or older by the first day of classes for the above term?	Yes No	12. Date of Birth:	/ (mm/	/ /dd/yyyy)	
13. Citizen Status: U.S. Citizen U.S. Permanent Resident Other Specify:					
14. State of Domicile: Alabama Florida North Carolina South Carolina Tennessee					
15. As of the first day of classes for the term you are requesting the waiver, will the above border state have been your present and permanent home (domicile) for at least 12 consecutive months? \Box Yes \Box No					
16. What is your current county of domicile? 17. Have you graduated, or will you graduate, from high school in the above border state?					
18. Have you lived outside of the above border state? Yes No					
If Yes: 18a. Date you moved to the above border state: (<i>mm/yyyy</i>)					
18b. Briefly describe your reason for moving to the above border state:					
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19. Do you hold a current driver's license/stat		-	State issued?		
		_	<u> </u>		
21. Are you registered to vote?		_	6		
most recent tay year?			State filed?		
		If Yes: 1	Residency status filed:	 Full-Year Resident Part-Year Resident Non-Resident 	
Employment Information - List all employment for the past two years, including military service. Attach additional sheets if needed.					
From Date To Date Employer	City		State # of I	hours worked per week	

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Section II – To be completed by students under the age of 24 Do you have a parent or U.S. court-appointed legal guardian who has established and maintained domicile in an eligible state (Alabama, Florida, North Carolina, South Carolina, Tennessee) bordering Georgia for at least 12 consecutive months immediately preceding the first day of classes for the term the waiver is requested?					
If Yes:	Name of the above individual:				
	Relationship:				
Has that individual ever lived outside of the above state? \Box Yes \Box No					
	If Yes: They have maintained domicile in the above state since:				
	Do they hold a current driver's license/state-issued ID?				
	Do they own a motor vehicle? Image: State-issued iD? Image: State issued ? Image: State issued ?				
	Are they registered to vote? Yes No State registered?				
	Did they file a <u>state</u> income tax return for the most recent tax year?				
	If Yes: State filed? Were you claimed as a dependent?				
	Did they file a <u>federal</u> income tax return for the most recent tax year?				
	If Yes: Were you claimed as a dependent? Yes No				
Section III – S	TUDENT Oath and Affirmation				
I understand that any material false statement made knowingly and willingly by me on this application, or any documents attached hereto may, in accordance with O.C.G.A. 16-10-71, which provides that upon conviction, a person who knowingly commits the offense of false swearing shall be punished by a fine of not more than \$1,000 or by imprisonment for not less than one nor more than five years, or both, subject me to prosecution in a court of law. Additionally, I further understand that any such false statement may subject me to immediate dismissal from the institution. Further, I certify that, to the best of my knowledge, the information submitted on this application is true and complete.					
Student Signature	e Date				
Section IV –D	ocumentation Requirements				
 LAWFUL PRESENCE IN THE UNITED STATES Only those students verified to be lawfully present in the United States may be considered for an out-of-state tuition waiver. Accepted forms of Lawful Presence documentation are: Official Copy of a U.S. Birth Certificate or a U.S. certificate of birth abroad issued by the Department of State Copy of a current U.S. Passport Copy of a U.S. Certificate of Naturalization Copy of a U.S. Certificate of Citizenship A current, valid Permanent Resident Card Eligibility for federal student aid confirmed by the Office of Financial Aid 					
	TION OF WAIVER ELIGIBILITY be notified if additional documentation is needed.				
	Submit completed form and the necessary documentation to: South Georgia State College Registrar's Office 100 W. College Park Dr. Douglas, GA 31533 (912) 260-4406 registrar@sgsc.edu It is strongly suggested that you keep either an electronic or paper copy of the completed form for your records.				