

Office of Records, Registration and Veterans' Affairs [RRVA]

Appeal for Change of Residency Status

Staff Use Only
Completed Form (signed)
Address matches in RGPE
Column A
□Column B
ID: State MD_Issue Date
Staff Initials
Date Received

Legal residence for tuition purposes is based on a student's permanent place of residence for a period of no less than three months. Requests will be considered during the first three weeks of fall and spring terms or the first week of winter and summer terms. After that time, requests will be considered for the next term. Change of Immigration Status requests are submitted to international student advisors in the Office of Admissions and Advising.

Complete Part I of this application and provide a minimum of one document from each column below in your name. If for the most recent 12 months, another person(s) has provided one-half or more of your financial support, you must complete Parts I and II of this application and provide a minimum of one document from each column listed below in your supporter's name. Your supporter must also prove residency for a period of no less than three months.

Please submit completed requests to RRVA in RCF 233 or to register@howardcc.edu. Residency appeals will not be accepted without documentation. Residency decisions will be emailed to your HCC email within two weeks of submission of the application.

Acceptable documents (only documents listed will be accepted):

One item from Column A: Valid Maryland driver's license, MVA issued change of address card, or valid state issued ID Voter's registration card Rental agreement/deed/lease Vehicle registration *All documents in this column must be dated at least 3 months prior to the start of the term							One item from Column B: Utility bill dated at least 3 months prior to the start of the term: gas, electric, phone, cable, water Howard county tax bill dated at least 3 months prior to the start of the term Maryland or US income tax return from the most recent tax year Maryland or US withholding form from the most recent tax year Pay stub with current address dated at least 3 months prior to the start of the term						
Part I – To be completed by student													
1. Student ID Number								2. Term	Year				
3. Student Name													
4. Home Address									Apt./Unit				
City								State	Zip Code				
County (i.e. Howard, Mon	ntgomer	y, etc.	.)										
5. Dates of residency at curr	ent add	ress _			to			Phone Number					
5. For the most recent 12 mo question is yes, Part II must l	onths, h	nas and pleted	other p	erson ur sup	n(s) pro porter	vided)	one-h	nalf of more of your finar	ncial support? (If the answer to this				
certify that all the informat accurate informatiaccurate information and fal	ion I ha Isificatio	ve pro	ovided dentity	on thi can l	s appli ead to	cation legal a	is tru	e and complete. I under and college sanctions, in	rstand that failure to provide ncluding dismissal from the college, to verify information submitted on				
Student Signature						Date							

OFFICE USE	ONLY									
Acceptable Documents from Column A:				Acceptable	Documents from Colu	Supporter Form				
	MD driver's license	e or ID			Utility bill					
	Voter's registration	n Card			Howard County tax bill					
	Rental agreement/l	lease/deed		MD income tax return						
	Vehicle registration	n card			MD withholding form					
				Pay stub						
Decision:										
	•	te/Out O ounty	ut of State	Signature		Date	Rebill Requested			

Part II – To be completed by supporter (Complete only if the answer to question 6 on Part I is "Yes")

1.	Student ID Number										
2.	Student Name										
3.	Name of Supporter						Rela	ationship	to Studen	t	
4.	Home Address									Apt./Unit	
	City							State	9	_ Zip Code	
	County (i.e. Howard, Montgome	ry, etc.) _									·
	Phone Number										
5.	Are you registered for vote?	Yes	No			Count	ТУ		Date	of Registration	
6.	Do you possess a valid driver's li	cense or	state ID ?	Yes	No			State		Expiration	 on
7.	Do you own a motor vehicle?	Yes	No	_	State	of Reg	istration	_	Date of F	Registration	
8.	List where you filed income tax	returns fo	or the pas	t two y	years.						
	Year State			Cou	unty						
	Year State			Cou	unty						
9.	Additional Information										
hav	ertify that I have financially suppor we provided on this form is true ar ormation submitted on this form.										tion I
Sigi	nature of financial supporter				-				Date		