

**RESIDENCY INFORMATION****SCHOOL OF PUBLIC HEALTH  
GEORGIA STATE UNIVERSITY**

This section must be completed by all applicants. Please print clearly.

Name \_\_\_\_\_ Panther ID Number \_\_\_\_\_  
Last (family name) First Middle (optional)

Address \_\_\_\_\_ Length of time at this address \_\_\_\_\_  
Number/Street Years/Months

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_

Telephones: (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_  
Area Code Home Area Code Other

Place of Birth \_\_\_\_\_  
City State Country

Country of Citizenship \_\_\_\_\_

If not U.S. Citizen, Visa Type \_\_\_\_\_  
**(Attach a copy of both sides of your Permanent Resident Alien Card, 1-94, or other visa paperwork.)**

For the purpose of establishing Georgia residency for tuition and fee payment, your legal residence is your permanent home. Not only must you live in Georgia but you must remain indefinitely. The durational requirement for Georgia residency under the Board of Regents' regulation is 12 months immediately before the semester for which you intend to enroll. If you entered Georgia to attend an educational institution, the time in school is not normally counted toward the 12-month residency requirement. If you have any questions, please feel free to call 404/413-1452 or e-mail the university's residence auditor at sphadmissions@gsu.edu.

I wish to be considered a Georgia resident for tuition and fee payment purposes:

- Yes (You must complete the resident information on the reverse side of this form.)**
- No (You must complete the information below.)**

**NON-GEORGIA RESIDENTS**

If you do not consider yourself to be a Georgia resident, please list your home state (if U.S.) or country \_\_\_\_\_ and please sign here \_\_\_\_\_ Date \_\_\_\_\_

The Board of Regents offers waivers of the non-resident fees based on certain circumstances. Please indicate if you feel that you may qualify for a waiver of the nonresident fees based upon:

- employment as a full-time teacher (by you or a supporting parent) in the Georgia public school system
- full-time employment in the University System of Georgia (by you, a spouse or a supporting parent)
- employment as a career consular officer (by you, a spouse or a supporting parent)
- marriage to and dependence on a Georgia resident (for 12 months)
- dependence on a parent or guardian who has been a resident for 12 months
- military active duty in Georgia (by you, a spouse or a supporting parent); this includes commissioned officers in the Public Health Service stationed in Georgia on active duty

**GEORGIA RESIDENTS CONTINUE ON REVERSE SIDE**

NAME: \_\_\_\_\_

**GEORGIA RESIDENTS**

I have lived continuously in GA since       I currently reside in \_\_\_\_\_ County, GA.  
month day year

**Please indicate all situations that apply in your case:**

(A) I am an independent person who has not been claimed as a dependent on anyone else's income tax return and provided more than 50% of my income/financial support and I have maintained legal residence in Georgia (including payment of Georgia taxes) for the 12 months prior to the semester for which I intend to enroll.

(B) I am the child of a Georgia resident or the spouse of a Georgia resident who has maintained legal residence in Georgia for the 12 months prior to the semester for which I intend to enroll.

(C) I have a legal guardian who has maintained legal residence in Georgia for the 12 months prior to the semester for which I intend to enroll.

(D) I (or my parents) am in the U.S. military and the home of record is Georgia. The income taxes are filed with and paid to the State of Georgia.

According to the U.S. Immigration and Naturalization Service. I am a Permanent Resident Alien or other legal alien granted indefinite stay and I also qualify for  A  B  C  D above (I will attach a copy of my visa paperwork: 1-20, 1-55, 1-51, passport, etc.)

**Please note:**

**The following circumstances alone do not constitute sufficient evidence to effect classification as a resident under Regents' policies but may assist in determining your residency.**

Do you:

have a driver's license?  Yes  No

If yes, in which state is it registered? \_\_\_\_\_

own a motor vehicle?  Yes  No

If yes, in which state is it registered? \_\_\_\_\_

have a voter registration?  Yes  No

If yes, in which state are you registered? \_\_\_\_\_

State income taxes filed in past year?  Yes  No

If yes, in which state did you file? \_\_\_\_\_

If you answered yes to any of the above and the state is not Georgia, please attach an explanation and return it with this form.

If you did not graduate from a Georgia college or came to Georgia in the last two years, please tell us why you came to Georgia and your plans for the future.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List all employment for the past two years:

Employer	Location (City and State)	From (month/year)	Dates To (month/year)	Full-time (Approx. # of hours per week)	Part-time
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

List all educational institutions attended during the past two years:

Institution	Location (City and State)	From (month/year)	Dates To (month/year)	Full-time (Approx. # of hours per week)	Part-time
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

I, the undersigned, hereby affirm the authenticity of the information provided. I understand that any false or misleading information may result in denial of admission or expulsion from the university. I further understand that it may also cause me to be billed for the nonresident fees.

Signature \_\_\_\_\_ Date \_\_\_\_\_