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Student ID (E Number) Last Name First Name

2023-2024 VERIFICATION OF PARENT ILLINOIS RESIDENCY

FOR DEPENDENT STUDENT

In order for a dependent student to be eligible for the Monetary Award Program (MAP), the PARENT whose information is included on the student's Free Application for Federal Student Aid (FAFSA) must be a resident of the State of Illinois. It is this office's responsibility to ensure that all MAP recipients meet this requirement set forth by the Illinois Student Assistance Commission (ISAC). For a dependent student to be considered an Illinois resident: the PARENT of the dependent student must physically reside in Illinois and Illinois must be their true, fixed, and permanent home.

Failure to complete this form will delay the processing of your aid.

ALL QUESTIONS PERTAIN TO PARENT

	ALL COLSTIONS PERTAIN TO PARENT	
	At the time of filing the FAFSA, my/our state of legal residence was no gal residence was:	t Illinois. My/Our state of
	(Skip the documentation section, sign the form and submit it to the O	ffice of Financial Aid and
	———— OR ———	
B1	. At the time of filing the FAFSA my/our Illinois address was:	
В2	. I/we became an Illinois resident on this date (MO/YR):	
	DOCUMENTATION:	
Ple	ease have your PARENT attach a copy of ONE of the following docume	nts:
1.	His/Her (valid) Illinois Driver's License or State of Illinois Identification (FAFSA filing date	Card, issued prior to
2.	A copy of his/her 2022 Illinois (state) tax form filed verifying your PARE	ENT'S residency
3.	2022 W2 (Wage and Tax Statement)	
4.	Rental Lease agreement with Illinois address, dated prior to October 2	022
	I/We certify that the above information is a true and corr	ect statement.
STUDENT	SIGNATURE	DATE
PARENT 1	SIGNATURE	DATE
 PΔRFNT 2	SIGNATURE	DATE

Complete and sign this form, then submit it to our office in person (Student Services Building East Wing), via email at **finaidverification@eiu.edu** or by fax at 217-581-6422.

