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Student ID # Last Name First Name

2016-2017 VERIFICATION OF STATE OF LEGAL RESIDENCE–INDEPENDENT STUDENT

PLEASE PRINT OR TYPE IN BLACK INK

1. As of 9-1-15 my state of legal residence was not Illinois. My state of legal residence was _____.

2. Because your state of legal residence is in question for state eligibility, verification of your place of residence is required. If you claim Illinois residency, list below your place of residence for each time period.

A legible copy of your driver's license or State Identification Card AND a legible copy of your 2015 Illinois State Income Tax Return must also be attached to this form. ***(Failure to complete this form will delay the processing of your aid.)***

I became an Illinois resident on this date: _____/_____
(month/year)

Please indicate in the right column your (the student's) address on the following dates:	**Please enter your address for each time period in this column.**
September 1, 2015	
October 1 - December 31, 2015	
January 1 - March 31, 2016	
April 1 - June 30, 2016	
July 1 - September 1, 2016	

I certify that the above information is a true and correct statement.

_____ _____
Student's Signature Date

_____ _____
Spouse's Signature Date

EASTERN ILLINOIS UNIVERSITY
OFFICE OF FINANCIAL AID AND SCHOLARSHIPS, 600 LINCOLN AVENUE, CHARLESTON, IL 61920
TELEPHONE 217-581-6405 FAX 217-581-6422 EMAIL finaidverification@eiu.edu