

**2008-09 VERIFICATION OF STATE OF LEGAL RESIDENCE
DEPENDENT STUDENT**

PLEASE PRINT OR TYPE IN BLACK INK!

STUDENT'S NAME

Last Name

First Name

Soc. Sec. #

EIU ID#

**ALL QUESTIONS PERTAIN TO PARENT-PARENT ANSWERS ALL QUESTIONS,
STUDENT DOES NOT.**

Because your **PARENT'S** state of legal residence is in question for state eligibility, verification is required. Please have your supporting **PARENT** mark the appropriate box and provide the address where that **PARENT** resided at the time your Free Application for Federal Student Aid (FAFSA) was completed. *Failure to complete this form will delay the processing of your aid.*

ANSWER ALL QUESTIONS BELOW!

1. At the time of filing the FAFSA, my (our) state of legal residence was not Illinois. It was _____.

OR

2. At the time of filing the FAFSA my (our) Illinois address was _____.
3. **I BECAME AN ILLINOIS RESIDENT ON THIS DATE (MO/YR):** _____

***Please have your PARENT attach a copy of:**

1) his/her driver's license or State of Illinois Identification Card AND

2) a copy of the 2007 Illinois tax form filed verifying your parent's residency.

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

Student's Signature

Date

Father's/Step-Father's Signature

Date

Mother's/Step-Mother's Signature

Date

MAIL THIS FORM TO EASTERN ILLINOIS UNIVERSITY, OFFICE OF FINANCIAL AID, 600 LINCOLN AVE,
CHARLESTON, IL 61920-3099. FAX 217-581-6422.

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