

A Unit of the Technical College System of Georgia

Office of Admissions

80 Cohen Walker Drive Warner Robins, GA 31088 p: (478) 988-6850 f: (478) 988-6947

e: admissionsoffice@centralgatech.edu

## PETITION FOR CHANGE OF RESIDENCY CLASSIFICATION

## This form is to be used only by students that have completed the admissions process.

Please complete all parts of all sections, attach the required documents from Section 3, and return to the Office of Admissions.

| Last Name                | First Name                   | Middle          | Stud     | ent ID Number |               |
|--------------------------|------------------------------|-----------------|----------|---------------|---------------|
| Street Address           |                              |                 |          |               |               |
| City                     |                              | State           | Zip Code |               | Date of Birth |
| CGTC Student Email Addre | SS                           |                 |          |               |               |
| Petition submitted fo    | r the following semester*: [ | ∃ Fall □ Spring | □ Summer | Year          |               |

\*Petition for change in residency must be received by the last day of the drop/add period to be considered for the current semester. Requests made after the end of the drop/add period, if approved, will be effective for future semesters only. The change will not affect present or past semesters.

| Section 2  |                                   |                             |  |  |  |  |  |  |
|--|-----------------------------------|-----------------------------|--|--|--|--|--|--|
| Which residency status are you requesting  | g a change from (please check ONI | E):                         |  |  |  |  |  |  |
| Out-of-state to in-state Georgia   | Foreign to out-of-state           | Foreign to in-state Georgia |  |  |  |  |  |  |
| *If you are not a United States citizen, you must provide proof of permanent residence status or asylum status to be considered for in-state or out-of-state status. |                                   |                             |  |  |  |  |  |  |
|  |                                   |                             |  |  |  |  |  |  |
| Section 3  |                                   |                             |  |  |  |  |  |  |
| Please select one:   |                                   |                             |  |  |  |  |  |  |
| □ I am 24 years old or older (independ   | dent)                             |                             |  |  |  |  |  |  |
|  |                                   |                             |  |  |  |  |  |  |

- □ I am under 24 years old and my parent/guardian did not claim me on their most recent tax return (independent)
- □ I am under 24 years old and my parent/guardian claimed me on their most recent tax return (dependent)

Attach at least TWO of the following documents (documents must be more than 12 months old and in your name if you are an independent or in your parent/guardian's name if you are dependent):

- Georgia State Income Tax Form 500
- $\hfill\square$  Notarized letter on company letterhead indicating lease status
- Georgia Automobile Registration
  Georgia Voter Registration
- Proof of ownership of primary residence in Georgia
  Utility bill (other than cell phone)

- Georgia Driver's License
  - Priver's License

Dependent students only: you must also attach a copy of your parent/guardian's most recent Georgia tax return showing that you were claimed on your parent/guardian's taxes (all information can be blacked out except the student's social security number).

Submission of this form does not guarantee a change of residency status; the decision to change residency is at the discretion of CGTC. This request will not be considered if the form is incomplete and/or missing required documentation. This form is not a financial aid document and will not be used for financial aid purposes. Students will be notified of the outcome of this request via email.

| Student's Signature             | Date                |  |
|---------------------------------|---------------------|--|
|                                 | FOR OFFICE USE ONLY |  |
| Approved Denied Reason:         |                     |  |
| Date status emailed to student: | Official signature  |  |