

RESIDENCE CLASSIFICATION FOR FEE-PAYING PURPOSES AT INDIANA UNIVERSITY

New students whose residence classification for fee-paying purposes has never been determined must complete this form before registering for classes. Students returning to IU after an absence of twelve or more consecutive months must complete this form in order to clarify their residence status.

University ID _____
(if previously assigned) Ten-digit University ID Number

REGISTRATION SEMESTER/YEAR: _____ AUDIT DEADLINE (office use): _____

NAME: _____ DATE OF BIRTH: _____

U.S. VISA TYPE (NON-U.S. CITIZENS ONLY): _____ MILITARY TAX WITHHOLDING STATE: _____
(from leave and earnings statement)

Addresses Where You Have Resided FOR THE PAST 3 YEARS:				
Dates (month/year)	Street	City	State	Zip Code
From To				

Names and Addresses of Employers FOR THE PAST 3 YEARS:				
Dates (month/year)	Employer	City	State	Full-or Part-time
From To				

Colleges and Universities Attended FOR THE PAST 3 YEARS (include I.U.):				
Dates (month/year)	Institution	City	State	Degree
From To				

High School Information:				
Dates (month/year)	Institution	City	State	Graduation (month/year)
From To				

I certify that the information provided on this form is complete and correct to the best of my knowledge.

STUDENT'S SIGNATURE

DATE

IF YOU ARE UNDER 21, PLEASE SUPPLY THE FOLLOWING INFORMATION:
Name of parents:
Address of parents (street):
(city & state):

FOR OFFICE USE ONLY:
Residence Classification:
Classifier's Initials:
Date: