



## 2023-2024 Georgia Residency Verification Worksheet

Please Type or Print clearly in BLUE or BLACK ink

|   |                      |                |  |
|---|----------------------|----------------|--|
| Student's Last Name                             | Student's First Name | Student's M.I. | Southern Crescent Student ID #           |
| Student's Street Address (include apt. no.)     |                      |                | Student's Date of Birth                  |
| City  | State                | Zip Code       | Student's Email Address                  |
| Student's Home Phone Number (include area code) |                      |                | Student's Alternate or Cell Phone Number |

In order to determine HOPE Scholarship/Grant Eligibility, additional documentation is needed to verify Residency. Please complete this form and return 1.) A completed copy of your 2021 & 2022 State of Georgia Tax Return (if an Independent Student) or a completed copy of your Parent(s) 2020 & 2021 State of Georgia Tax Return (if considered a Dependent Student) and 2.) A copy of one of the following requested documents from the list on the right below.

Please select which documents are included with this verification request form and return to the Office of Financial Aid as soon as possible to complete the review of your application for Financial Aid.

**NOTE:** Georgia Student Finance Commission (GSFC) requires a period of established Georgia Residency.

| A. PROVIDED RESIDENCY DOCUMENTATION |   |   |
|-------------------------------------|---|---|
| <b>Dependent Student</b>            | <input type="checkbox"/> 2021 Parent's GA State Tax Return <b>AND</b><br><input type="checkbox"/> 2022 Parent's GA State Tax Return   | <input type="checkbox"/> A copy of Father's GA Driver's License <b>AND</b><br><input type="checkbox"/> A copy of Mother's GA Driver's License<br><p style="text-align: center;"><b>- OR -</b></p> <input type="checkbox"/> A copy of Father's GA Voter Registration Card <b>AND</b><br><input type="checkbox"/> A copy of Mother's GA Voter Registration Card |
| <b>Independent Student</b>          | <input type="checkbox"/> 2021 Student's GA State Tax Return <b>AND</b><br><input type="checkbox"/> 2022 Student's GA State Tax Return | <input type="checkbox"/> A copy of Student's GA Driver's License<br><p style="text-align: center;"><b>- OR -</b></p> <input type="checkbox"/> A copy of Student's GA Voter Registration Card  |

| B. ESTABLISHED RESIDENCY HISTORY   |                |                      |
|--|----------------|----------------------|
|  | PARENT         | STUDENT              |
| Current State of Legal Residence   |                |                      |
| Date you became a Resident (Month/Year)                                    | ____/____/____ | ____/____/____       |
| Date of High School Graduation/GED   |                | ____/____/____       |
| Name of Final High School  |                |                      |
| Location of the High School (City, State)                                  |                | City: _____ State: _ |
| Name of the first Georgia College or University attended after High School |                |                      |
| Start Date of the Georgia College or University attended (Month/Year)      |                | ____/____/____       |

I certify that the information I am providing is true, complete, and correct to the best of my knowledge.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature (If Dependent): \_\_\_\_\_ Date: \_\_\_\_\_