



2019-2020 Georgia Residency Verification Form

Student Number: _____ Student Name: _____

Section I- All Students Must Complete

1. Were you born in Georgia? Yes (If yes, answer questions 3,4, and 5) No (If no, answer questions 2 and 5)
2. When did you move to Georgia? _____(Month/Year)
3. Did you graduate from a Georgia high school or receive a GED in Georgia? Yes No
4. What is the name of the Georgia high school? _____Date of graduation or receipt of GED_____
5. What is your legal state of residency? _____ How many years in that state? _____

Section II – Complete this section if you are a Dependent Student

1. Have your parent(s); or primary parent (if parents are divorced) lived in Georgia for two consecutive years? Yes No
2. If no, in what state does your parent(s) reside? _____
3. Did your parent(s) file Georgia 500 state taxes for the past 2 years? Yes No
4. Are your parent(s) active duty military? Yes (if yes, include a copy of their recent orders) No

Section III- Complete this section if you are an Independent Student

1. Do you file a Georgia state income tax return? Yes No
2. Do you live in Georgia year-round, e.g. through breaks and summers? Yes No
3. Are you active duty military? Yes (if yes, include a copy of your recent orders) No
4. If married, is your spouse active duty military? Yes (if yes, include a copy of their recent orders) No

Section IV- All Students

You will be required to submit documentation to prove your Georgia residency status (and, if you are dependent, your parent(s) GA residency) for the 1 year prior to the semester that you are planning to attend Savannah Technical College if you graduated from a GA high school. Dependent students who did not graduate from a GA high school parent must prove 2 years of GA residency prior to the start of the attending semester. Examples of documents you may use are: 2017 and 2018 Georgia state income tax return, a lease agreement, mortgage, a copy of driver’s licenses, voter registration, or military orders, etc. The documentation you provide will be used to determine if you are considered a Georgia resident for state aid purposes.

By signing below you are certifying that all information provided is true and accurate. Providing false or misleading information to obtain aid will result in loss of eligibility, and may be result in fines, jail, or both.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____
(For Dependent Students only)

Processed by: _____ Date Processed: _____