



PLEASE PRINT OR TYPE.

2009–10 Residency Statement and Signature

Indiana University is a state-funded public university. As a result, Indiana residents and nonresidents pay different rates for tuition. Initial residency status (for tuition purposes) is determined by the information you provide on this form. Once you have filled out this form, you must sign it and return it to the School of Continuing Studies.

STUDENT INFORMATION

FULL LEGAL NAME Last First Middle

Suffix (Jr., Sr., etc.) Nickname () Phone number

Street address

City State ZIP

Birth date (mm/dd/yy) Female Male

User ID (assigned to you if you have previously registered for independent study courses) _ _ _ _ _

RESIDENCY STATUS Your answers to these questions will help determine your residency status. Residency classification for purposes of tuition and fees as determined through the Independent Study Program apply *only* to that program. Residency classification is subject to change according to university policy and specific agreements at other IU campuses.

Do you claim Indiana as your legal residence? Yes No

Have you resided in Indiana for the past 12 consecutive months for purposes *other than* higher education? Yes No

Are you a full-time active member of the military services (or the current spouse of said member) who is stationed in Indiana and whose permanent residence is in a different state? Yes No

I understand that withholding pertinent information requested on this application or giving false information will make me ineligible for enrollment in courses offered through the Indiana University School of Continuing Studies and may also be grounds to deny me admission to Indiana University or to cancel admission if admission has already been granted.

Your signature (required) Date (mm/dd/yy)

RSAS0709

MAIL OR FAX THIS FORM TO
IU School of Continuing Studies, Owen Hall 001, 790 E. Kirkwood Ave., Bloomington, IN 47405,
Attn: Course Registration. Fax 812.855.8680.