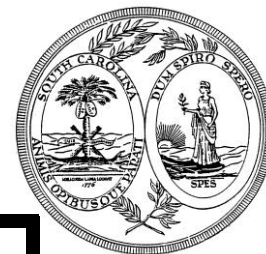


# SC Residency **Re-certification** Application

## South Carolina Commission on Higher Education

### Southern Regional Education Board Regional Contract Program



<p style="text-align: center;"><b>Submit completed application to:</b>  <b>Kenita D. Pitts, M.S.</b>  <b>SC Commission on Higher Education</b>  <b>1122 Lady Street, Ste. 400</b>  <b>Columbia, SC 29201</b>  <b>803.856.0037/ kpitts@che.sc.gov</b></p>	<p><b>Application deadline:</b>  <b>June 1, 2024</b></p> <p><b>Applications will not be accepted after the deadline.</b></p>
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**CONTACT INFORMATION:**

Name: \_\_\_\_\_  
(Last) (First) (Middle)

**PERMANENT ADDRESS:**

Street address (PO Box not acceptable) \_\_\_\_\_  
(City) (State) (Zip)

Telephone: (H) \_\_\_\_\_ (C) \_\_\_\_\_ Email: \_\_\_\_\_

**ENROLLMENT INFORMATION:** Please select the institution you attend.

<b>Veterinary Medicine:</b> <input type="checkbox"/> Tuskegee University <input type="checkbox"/> University of Georgia <input type="checkbox"/> Mississippi State University	<b>Optometry Medicine:</b> <input type="checkbox"/> Southern College of Optometry <input type="checkbox"/> University of Alabama - Birmingham <input type="checkbox"/> Kentucky College of Optometry - Pikeville	<b>Start Date:</b> _____ <b>Expected Graduation Date:</b> _____
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**RESIDENCY STATUS: Basis of your application for residency status (select one)**

- Independent student demonstrating domicile and residency in South Carolina. *(To qualify as an independent you cannot be claimed as a dependent or exemption on the federal tax return of her/his spouse, parent, guardian for the previous year.)*
- Dependent student demonstrating residency and domicile or South Carolina resident parent, guardian, or spouse)
- Seeking South Carolina residency status through duty in the armed forces.

**EMPLOYMENT HISTORY:** *(If independent, insert your employment information. If dependent, insert spouse's, guardian's or parent's employment information.) Use separate sheet is more space is needed.*

Employer	City/State	Dates employed	FT or PT employment
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**To provide verification of SC residency must submit a copy of all 3 of the following:**

*Independent student: Supporting documentation indicating SC domicile should have your information.*  
*Dependent student: Supporting documentation indicating SC domicile should have your parent/legal guardian/spouse's information.*

- \* SC Driver's license or Identification card (valid) applicant and parent/guardian
- SC Motor vehicle registration (parent/guardian if applying as a dependent student)
- SC State income tax return from previous year **(page 1 only showing student as dependent or independent)**

**Are you a United States citizen:** \_\_\_\_\_ *If no, what is your VISA classification?* \_\_\_\_\_

I hereby solemnly swear and affirm that the information provided in this application is true and I understand it will be used to determine my eligibility as a legal resident of South Carolina.

\_\_\_\_\_  
 Signature of applicant

\_\_\_\_\_  
 Signature of parent/guardian/spouse

**NOTARY PUBLIC INFORMATION:**

Sworn and subscribed to before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
 Notary public's printed name

\_\_\_\_\_  
 Notary public's signature

\_\_\_\_\_  
 Commission expiration date

*(Affix seal to this document. If you are a South Carolina notary and do not have a stamp or seal, please include your title (SC Notary) with your signature.)*

**NOTE: Applications will not be accepted after June 1, 2024.**