



<u>Office Use</u> Address matches in RGPE: _____ ID: State _____ Issue Date: _____
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Office of Records, Registration and Veterans' Affairs [RRVA]

Appeal for Change of Residency Status

Directions: Complete all items on the appeal and submit to RRVA. Requests will be considered during the first three weeks of fall and spring terms or the first week of winter and summer terms. After that time, requests will be considered for the next term. For change of immigration status, please complete the Change of Immigration Status with an international student advisor in the office of admissions and advising.

Complete Part I of this application and provide a minimum of two documents (at least one from each column below) in your name. If for the most recent 12 months, another person has provided one-half or more of your financial support, you must complete Parts I and II of this application and provide a minimum of two documents listed below in your supporter's name. Your supporter must also prove 3 month residency.

A decision will be emailed to your HCC email within two weeks of submission of the application.

Acceptable documents:

- One item from Column A:**
- Valid Maryland driver's license, MVA issued change of address card, or valid state issued ID
 - Voter registration card
 - Rental agreement/deed/lease
 - Vehicle registration card

- One item from Column B:**
- Utility bill dated at least 3 months prior to the start of the term: gas, electric, phone, cable, water
 - Howard county tax bill dated at least 3 months prior to the start of the term
 - Maryland or US income tax return from the most recent tax year
 - Maryland or US withholding form from the most recent tax year
 - Pay stub with current address dated at least 3 months prior to the start of the term

Part I – To be completed by student

HCC Student ID Number _____ Term and Year _____

Student Name _____

Home Address _____ Apt./Unit _____

City _____ State _____ Zip Code _____

County (i.e. Howard, Montgomery, etc.) _____

Dates of residency at current address _____ to _____

Are you registered for vote? Yes No County _____ Date of Registration _____

Do you possess a valid driver's license? Yes No State _____ Expiration _____

Do you own a motor vehicle? Yes No State of Registration _____ Date of Registration _____

List where you filed income tax returns for the past two years:

Year _____ State _____ County _____

Year _____ State _____ County _____

For the most recent 12 months, has another person provided one-half of more of your financial support? (If the answer to this question is Yes, Part II must be completed by your supporter.) Yes No

I certify that all the information I have provided on this application is accurate, honestly presented and complete. I understand that failure to provide accurate information and falsification of identity can lead to legal action and college sanctions, including dismissal from the college, and/or retroactive adjustment of tuition. I agree to provide additional documents upon request to verify information submitted on this form.

Student Signature _____ Date _____

OFFICE USE ONLY				
Column A:		Column B:		
_____	MD driver's license or ID	_____	Utility bill	
_____	Voter's registration Card	_____	Howard County tax bill	
_____	Rental agreement/lease/deed	_____	MD income tax return	
_____	Vehicle registration card	_____	MD withholding form	
		_____	Pay stub	
Decision: _____				
	In County	In State/Out of County	Out of State	Signature _____ Date _____

RRVA 2/27/17

Part II – To be completed by supporter
(Complete only if another person provided one-half of more of your financial support)

HCC Student ID Number _____

Student Name _____

Name of Supporter _____ Relationship to Student _____

Home Address _____ Apt./Unit _____

City _____ State _____ Zip Code _____

County (i.e. Howard, Montgomery, etc.)

Are you registered for vote? Yes No County _____ Date of Registration _____

Do you possess a valid driver's license? Yes No State _____ Expiration _____

Do you own a motor vehicle? Yes No State of Registration _____ Date of Registration _____

List where you filed income tax returns for the past two years:

Year _____ State _____ County _____

Year _____ State _____ County _____

Additional Information _____

I certify that I have financially supported the above-named student for the most recent 12 months and that the information I have provided on this form is true and complete. I agree to provide additional documentation upon request to verify information submitted on this form.

Signature of Financial Supporter _____ Date _____