Student ID #					Last Name								First Name																	
E																														
18	319			>	(ILC	)19																								

## 2018-2019 VERIFICATION OF PARENT ILLINOIS RESIDENCY (FOR DEPENDENT STUDENT)

In order for a dependent student to be eligible for the Monetary Award Program (MAP), the PARENT whose information is included on the student's Free Application for Federal Student Aid (FAFSA) must be a resident of the State of Illinois. It is this office's responsibility to ensure that all MAP recipients meet this requirement set forth by the Illinois Student Assistance Commission (ISAC). For a dependent student to be considered an Illinois resident: the PARENT of the dependent student must physically reside in Illinois and Illinois must be his/her true, fixed, and permanent home.

Failure to complete this form will delay the processing of your aid.

	**** ALL QUESTIC	ONS PERTAIN TO PARENT *****
A.	At the time of filing the FAFSA, my/our stat was	e of legal residence was <u>not</u> Illinois. My/Our state of legal residenc
(S		m and submit it to the Office of Financial Aid and Scholarships.)
	*	**** OR ****
B1	. At the time of filing the FAFSA my/our II	linois address was:
В2	. I became an Illinois resident on this date	e (MO/YR):
		CUMENTATION: ttach a copy of ONE of the following documents:
2)	His/Her (valid) Illinois Driver's License or St A copy of their 2017 Illinois (state) tax form 2017 W2 (Wage and Tax Statement)	ate of Illinois Identification Card, issued prior to August 2017.  I filed verifying your PARENT'S residency.
4)	•	ss, dated prior to August 2017
5)	Illinois Voters Registration Card	
I/We certif	y that the above information is a true and co	prrect statement.
Student's S	Signature	Date
Father's/S	tep-Father's Signature	
Mother's/	Step-Mother's Signature	 Date