

OZARKS TECHNICAL COMMUNITY COLLEGE

PETITION FOR CHANGE OF RESIDENCY STATUS FOR FEE PURPOSES

Name: _____ Student ID: _____
Last First MI

Residential Address: _____
Address City State Zip

Phone: (____) _____ - _____ Date of Birth: _____ / _____ / _____

Please check the category you are requesting:

_____ Out-of-State to In-State Residency

If you are requesting in-state residency, you must be a resident in Missouri at least (12) months prior to the start of the semester to be considered for a residency change.

_____ Out-of-State to In-District Residency

If you are requesting in-district residency from out-of-state, you must be a resident in-district at least (12) months prior to the start of the semester to be considered for a residency change.

_____ In-State to In-District Residency

If you are requesting in-district residency, you must reside in-district at least (3) months prior to the start of the semester to be considered for a residency change.

Documents needed for "Proof of Residency"

A. **If you are under the age of 21**, you must submit a copy of the first page of your parent(s) or guardians(s) most recent tax return. If your parent(s) or guardian(s) claim you on their tax return, you will be considered a resident of the state and school district in which your parent(s) or guardian(s) reside.

B. You must provide a **Missouri Drivers License or a Missouri Identification Card***. The address on the Identification Card must correspond with the address in which the student is using for the establishment of residency.

*Please attach a photocopy of your Missouri Driver's License or Missouri Identification Card.

C. You must provide OTC with copies of at least **two of the following items***. Special Circumstances may require additional documentation.

*The documentation must prove residency (12) months prior to the start of the semester for students moving from out-of-state and (3) months prior for students moving from in-state to in-district. Current statements are insufficient documentation.

_____ Lease agreement/home purchase agreement with current address

_____ Personal property tax receipt

_____ Utility bill with current address

_____ Bank statement with current address

_____ Voter registration card

D. Military Service may waive the required time component. Orders and/or Discharge paperwork is required.

E. Work relocation may waive the required time component. A letter on Company Letterhead detailing transfer from your supervisor is required.

All classifications of residency must be completed before the end of the 1st week of classes. If not, the decision will not go into effect until the following term of enrollment. Reclassification of residency is not retroactive to prior terms of enrollment.

I affirm/attest that the information and accompanying documentation included herein is true and accurate.

STUDENT SIGNATURE DATE

Please return this petition and required documentation to Student Services at any OTC Campus or Education Center.

Office of the Registrar 3/25/09

For Office Use:

Approved by: _____

Date: _____

System Adjusted: _____