



**RESIDENCY APPLICATION
Parental/Spouse/Guardian Supplemental Form**

This form must be accompanied by the Residency Application Student Form. This form is to be completed by the parents, spouse, guardian or any person having legal custody of any student or prospective student who is seeking to establish eligibility to pay the in-state rate on tuition and fees at Clemson University.

The questionnaire is to be completed by one of the following persons, as the situation requires: by the parent providing majority financial support; or by each parent if divorced/separated; by the student's legally appointed guardian; by the spouse if the student is married. **Please note that a Parental/Spouse/Guardian form is also required for students under the age of 24 in order to complete the application process.** Please be advised that if guardianship or custodianship was created primarily for the purpose of conferring South Carolina domicile for tuition and fee purposes on such child or dependent person, it shall not be given consideration or recognition.

The form should be completed, signed, **notarized** and returned to the address below at least two weeks prior to registration for the semester or summer term for which the student is attempting to qualify to pay the in-state rate on tuition and fees.

Determination of residency status will be made on the basis of the South Carolina Code of Laws printed on the insert, and regulatory guidelines promulgated by the South Carolina Commission on Higher Education.

Return to:	Incoming Freshmen/Transfer Students Office of Undergraduate Admissions Clemson University 105 Sikes Hall Clemson, SC 29634	Graduate Students and Continuing Undergraduates Office of Student Financial Aid Clemson University G-01 Sikes Hall Clemson, SC 29634
------------	---	---

Please check one of the following:

- Continuing Undergraduate Student** **Incoming Freshman or Transfer Student** **Graduate Student**

PERSONAL INFORMATION

The student or prospective student whose resident status is under consideration is _____, who is hereinafter called "student".

1. Student's Clemson ID Number _____
2. Name of person answering questionnaire: _____
3. Relationship to student: _____
4. Legal basis for exercising custody of student (father, mother having custody by court decree, guardian, spouse, etc.) _____
If custody awarded by court decree, provide a copy of such.
5. If parental custody, what is your marital status: _____
6. What is your present address (street, city and state)? _____
Telephone Number: _____ E-mail Address: _____
7. How long have you lived in the state listed in question 6 above? _____
8. What do you consider to be your "permanent" home address? _____

9. Do you have any intention at present of moving from your current address? **Yes** **No** If so, to what place? _____
10. If not living at your "permanent" home address (question 6), do you intend to live there sometime in the future? _____
11. Are you a citizen or permanent resident of the United States? **Yes** **No** If not, what is your nationality? _____

(If you hold an Alien Registration Card (I-94) or visa, please attach a copy.)

12. Do you pay taxes on real estate in South Carolina? Yes No On personal property? Yes No
 List all real property you own in South Carolina: _____
 Do you pay South Carolina Income Tax? Yes No If so, for how long? _____
12. Do you own real estate in any state other than South Carolina? Yes No
 Do you claim homestead exemption in any state? Yes No Where? _____
 Do you own or rent the home in which you are presently living? _____
 Do you pay income tax to any state other than South Carolina? Yes No Which? _____
13. Have you ever lived in South Carolina? Yes No If so, when? _____
14. If you live in South Carolina, how long have you lived here? (Give dates) _____

15. Has the student lived in South Carolina? _____

EMPLOYMENT AND FINANCIAL DATA

16. What is your occupation? _____
 Are you self employed? _____ *If so, attach a copy of your South Carolina business license.*
 If not, who is your employer? _____
 Where do you practice your occupation? _____
Note: If you are employed full time in the state of South Carolina, please attach statement from your employer on company letterhead. Statement must: 1) verify full time employment; 2) specify number of hours worked per week; 3) state original date of employment in South Carolina; 4) specify length or term of employment; if indefinite, so state.
17. If in government or military service, do official records show you to be a resident of South Carolina for more than one-half of your enlistment? Yes No *If in active military service provide a copy of your most current orders, Leave and Earning Statement, and Military Declaration of Domicile.*
18. Do you maintain any bank accounts in South Carolina? Yes No If so where? _____
19. Do you own any insurance policies with an insurance carrier in the state of South Carolina? Yes No
 If so, name of insurance company. _____

MISCELLANEOUS DATA

20. Do you have a valid South Carolina Driver's License? _____ *If yes, attach a copy of your license.*
21. List all vehicles owned and what state they are registered in: *Attach a copy of your registration certificate for all vehicle(s) owned.*
- | Vehicle Make/Model | State |
|--------------------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
22. Are you registered to vote? Yes No If so, where did you register? _____
 Have you ever voted in South Carolina? Yes No When? _____
 Have you ever voted in another state? Yes No Where? _____ When? _____
(If you are registered to vote in South Carolina, please attach a copy of your voter registration card.)
23. Did the student qualify as a tax dependent on the Federal Income Tax Return you filed for the preceding tax year? Yes No
 Tax Year _____ *Please attach a copy of that tax return to this questionnaire.* (You may black out all monetary figures if you desire.)

24. Will the student qualify as a tax dependent on the Federal Income Tax Return that you (Parent, Spouse) will file for the current year? _____
Circle one
Tax Year 20_____.

Note: You may be required to submit a copy of the current year's tax return once it has been filed. You will be notified if this information is needed.

25. Please give any other information you consider relevant to the student's claim of residence. _____

DECLARATION OF DOMICILE

(Declaration of Domicile to be completed only if parent/spouse/guardian is asserting domicile in South Carolina)

Domicile denotes your true, fixed and permanent home and place of habitation. It is the place where you intend to remain and to which you expect to return when you leave, without intending to establish domicile elsewhere.

Penalty: Willful misrepresentation of fact in an attempt to gain residency improperly may result in tuition and fees past due and unpaid to be charged, plus interest at the rate of eight percent (8%) per annum, plus a penalty in the amount of twenty-five (25%) of the non-resident tuition and fees for one semester.

- (1) I _____ declare under oath:
- (a) My birth date is _____ (b) I established my domicile in South Carolina on _____
- (c) I reside at _____
- (2) I have read the definition of domicile and the penalty prescribed for willful misrepresentation appearing above.

NOTARIZATION REQUIREMENT

STATE OF _____
County of _____

Signature of Parent/Spouse/Guardian

Subscribed before me this _____ day of _____, 20_____

My Commission Expires _____

Notary Public
Notary Seal