RESIDENCY APPLICATION FOR MILITARY

This form should be completed by a student who is seeking to pay the in-state rate on tuition and fees at Clemson University. Please return the form and all supporting documentation no later than the day before class begin for the semester you are seeking in-state tuition and fees. It is important to note that depending on the time of year it can take between 4 to 8 weeks for an application to be reviewed. Determination of residency status will be made based on the South Carolina Code of Laws and regulatory guidelines.

PLEASE RETURN THIS ORIGINAL FORM AND SUPPORTING DOCUMENTATION TO: (DO NOT EMAIL OR FAX)
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 Student
- Transfer Student
- Graduate Student

PERSONAL INFORMATION (Student)

1. Applicant’s Name: __________________________________________________________________________
(last name)          (first name)          (middle name)
(Preferred)

2. Clemson University XID: ______________________  E-Mail Address: _____________________________

3. In what category are you requesting residency status? Please check ONE of the following:
   - Independent Student
   - Dependent of: _____________________________  Relationship? ______________

4. Date of Birth: __________________   Age: _______  Student Marital Status: __________________________

5. Phone number where you can be reached: __________________

6. Address: Present __________________________________________________________________________

Permanen______________

7. For what semester are you requesting in-state tuition to begin? ________________________________

8. Have you applied for in-state tuition before?  YES  NO  If yes, When? __________________________
9. Parent’s marital status: ________________________________ (married, separated/divorced)

10. Do your parents claim you on their taxes?  
    - YES (If yes, provide copy of their most recent filed Federal taxes)
    - NO  
      If No, Is there joint custody or full custody due to divorce?  
      - YES  
      - NO  
        (if yes, please provide court papers to support this)

11. Parent/Spouse present address (street, city and state): __________________________________________

12. Parent Spouse email address:  ______________________________________________________________

MILITARY STATIONED IN SOUTH CAROLINA
(Not eligible for state scholarships i.e., LIFE/PALMETTO FELLOWS)

Are you/parent/spouse/guardian currently on active duty stationed in SC?  
- YES  
- NO  
  If yes, please provide current military orders and Leave and Earnings Statement.

MILITARY STATIONED OUTSIDE OF SOUTH CAROLINA
(not eligible for state scholarships i.e., LIFE/PALMETTO FELLOWS)

Are you/parent/spouse/guardian currently on active duty stationed at a base outside of South Carolina?  
- YES  
- NO  
  If yes, please provide military orders

Have you kept South Carolina as your home of record on your military paperwork?  
- YES  
- NO  
  If yes, please provide a copy of your Leave and Earnings Statement.

Have you filed SC Taxes as a SC resident and will you continue to claim SC as a resident?  
- YES  
- NO  
  If yes, please provide a copy of the past 2 years of SC State taxes (all pages).

MILITARY ACTS 11 and 22
(not eligible for state scholarships i.e., LIFE/PALMETTO FELLOWS)

Are you/parent/spouse/guardian a recipient of the Marine Gunnery Sergeant John David Fry Scholarship?  
- YES  
- NO  
  If yes, please provide award letter.

Are you a Dependent of service member killed in the line duty and receiving Chapter 30/33 benefits?  
- YES  
- NO  
  please provide your COE (Certificate of Eligibility), and submit documentation of relationship of deceased service member. (further documentation maybe required)
Do you receive Chapter 30 or 33 benefits? □ YES □ NO? If yes, please provide your COE (Certificate of Eligibility) and review the following questions

- Are you a Veteran? □ YES □ NO? If yes, please provide your DD214

- Are you a Dependent of a Veteran? □ YES □ NO? If yes, please provide your DD214

- Are you Active duty Military? □ YES □ NO? If yes, please provide a copy of your military orders and leave and earnings statement

- Are you a Dependent of Active Duty military? □ YES □ NO? If yes, please provide a copy of your parents military orders and a copy of their leave and earnings statement

Are you domiciled in SC? □ YES □ NO? Please provide a copy of your Deed/closing to your home or a lease

Are you going to live in University Housing? □ YES □ NO

62-611. Incorrect classification.

A. Persons incorrectly classified as residents are subject to reclassification and to payment of all nonresident tuition and fees not paid. If incorrect classification results from false or concealed facts, such persons may be charged tuition and fees past due and unpaid at the out of state rate. The violator may also be subject to administrative, civil, and financial penalties. Until these charges are paid, such persons will not be allowed to receive transcripts or graduate from a South Carolina institution.

B. Residents whose resident status changes are responsible for notifying the Residency Official of the institution attended of such changes.

I certify that the above information is true to the best of my knowledge.

________________________________________________     ____________________
(parent/spouse guardian)      (date)

________________________________________________  ____________________
(student)        (date)