

WINTHROP UNIVERSITY RESIDENCY INFORMATION

All applicants who claim residency in South Carolina or entitlement to in-state tuition are required to provide the requested information.
NOTE: Please complete this form in its entirety. Incomplete forms will be returned for completion. Additional information may be requested per SC Law 59-112.

Return to: Office of Admissions, Winthrop University, Rock Hill South, Carolina 29733

Name of Student: _____ Social Security Number **OR** Winthrop ID _____

Date of Birth: _____ City and State of Birth: _____

Age: _____ Country of Birth: _____

Applying as (check one): Freshman Transfer Second Undergraduate Degree Other: _____

1. Father living? Yes No Complete Name _____

2. Mother living? Yes No Complete Name _____

3. If parents are divorced or separated, who is (or was) the custodial parent? Father Mother

4. With whom do you reside? Both Parents Father Mother
 Other - Name: _____ Relationship: _____

5. Marital Status: Single Married Date of Marriage: Month _____ Year _____

6. When do you claim that your legal residence in South Carolina began?

Father: Month/Year _____ **Mother:** Month/Year _____

You: Month/Year _____ **Spouse:** Month/Year _____

7. Have you, either of your parents, or your spouse been in active military service within the last two years?

You: Yes No **Father:** Yes No **Mother:** Yes No **Spouse:** Yes No

8. Provide the permanent home address (do not use Post Office box number) of each person listed below.

Length of Time Lived Here

You: _____
Address (street, city, state, ZIP)

From: (month/year) To: (month/year)

Father: _____
Address (street, city, state, ZIP)

From: (month/year) To: (month/year)

Mother: _____
Address (street, city, state, ZIP)

From: (month/year) To: (month/year)

Spouse: _____
Address (street, city, state, ZIP)

From: (month/year) To: (month/year)

9. If length of time at the **address in #8 is less than 12 months**, provide information on the previous address.

Length of Time Lived Here

You: _____
Address (street, city, state, ZIP)

From: (month/year) To: (month/year)

Father: _____
Address (street, city, state, ZIP)

From: (month/year) To: (month/year)

Mother: _____
Address (street, city, state, ZIP)

From: (month/year) To: (month/year)

Spouse: _____
Address (street, city, state, ZIP)

From: (month/year) To: (month/year)

10. What is the citizenship status of each person listed below?

You: US Citizen US Permanent Resident - Effective Date: _____ Foreign Citizen with valid Visa - Visa Type: _____
Father: US Citizen US Permanent Resident - Effective Date: _____ Foreign Citizen with valid Visa - Visa Type: _____
Mother: US Citizen US Permanent Resident - Effective Date: _____ Foreign Citizen with valid Visa - Visa Type: _____
Spouse: US Citizen US Permanent Resident - Effective Date: _____ Foreign Citizen with valid Visa - Visa Type: _____

11. What is the current employment status of each person listed below? (If not employed, please indicate below.)

You: _____
Employer City, State, ZIP Beginning date of employment Hours per week
Father: _____
Employer City, State, ZIP Beginning date of employment Hours per week
Mother: _____
Employer City, State, ZIP Beginning date of employment Hours per week
Spouse: _____
Employer City, State, ZIP Beginning date of employment Hours per week

12. a. Were you claimed as a tax dependent for federal and state income taxes for the 2008 tax year (check one)?

- Yes
- No, I filed as an independent filer
- I filed a joint return with my spouse
- No one claimed me as a dependent for federal income tax purposes and I did not file a separate return as an independent filer

b. If yes to 12a, name(s) of persons who claimed you: _____

c. Relationship to you of person(s) named in 12b: Father and Mother Father Mother Self Legal Guardian Spouse

d. For the person(s) checked in 12a, a state return was filed for which state? _____

State Filing Status: Resident Non-Resident Part-year Resident

13. a. Will you be or were you claimed as a tax dependent for federal and state income taxes for the 2009 tax year (check one)?

- Yes
- No, I filed or will file as an independent filer
- I filed or will file a joint return with my spouse
- No one claimed or will claim me as a dependent for federal income tax purposes and I did not/will not file a separate return as an independent filer

b. If yes to 13a, name(s) of persons who claimed or will claim you: _____

c. Relationship to you of person(s) named in 13b: Father and Mother Father Mother Self Legal Guardian Spouse

d. For the person(s) checked in 13a, a state return was or will be filed for which state? _____

State Filing Status: Resident Non-Resident Part-year Resident

14. I am younger than 25 and was not or will not be eligible to be claimed as a dependent for federal income tax purposes for the reason provide below:

I was last claimed as a dependent for the _____ tax year
(year)

by: Name: _____ Relationship to you: _____

who filed state taxes as a resident of: _____
(name of state)

I hereby certify that the information I have provided is accurate and that I am making this application in good faith based on the belief that I am eligible to pay tuition and fees at the rate afforded to legal residents of South Carolina.

Signature _____ Date _____

Return to:

Office of Admissions • Winthrop University • Rock Hill, South Carolina 29733