

WINTHROP UNIVERSITY RESIDENCY INFORMATION NEW START APPLICANTS

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.

1. Social Security Number **OR** Winthrop ID _____

2. Name of Student: _____

First	Middle	Last	Suffix (Jr, III, etc.)
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3. Date of Birth: _____ Age: _____

4. City and state of birth: _____ Country of birth _____

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

6. When do you claim that your legal residence in South Carolina began?
 You: Month/Year _____
 Spouse: Month/Year _____

7. Have you or your spouse been in active military service within the last two years?
 You: 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 at this address:

 You: _____

Address (Street, City, State, ZIP)	From: (month/year)	To: (month/year)
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 Spouse: _____

Address (Street, City, State, ZIP)	From: (month/year)	To: (month/year)
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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 at this address:

 You: _____

Address (Street, City, State, ZIP)	From: (month/year)	To: (month/year)
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 Spouse: _____

Address (Street, City, State, ZIP)	From: (month/year)	To: (month/year)
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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: _____
 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 also indicate below.)
 You: _____

Employer	City, State, ZIP	Beginning month and year of employment	Hours per week
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 Spouse: _____

Employer	City, State, ZIP	Beginning month and year of employment	Hours per week
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12. a. For the tax year preceding the year of your enrollment, what will be/ was your federal income tax filing status?*

I will file/have filed a return as a single filer.

I will file/have filed a joint return with my spouse.

I was/will be claimed as a dependent by: Name: _____ Relationship: _____

I did not file a federal tax return for the tax year preceding the year of my enrollment for the following reason:

b. For the tax year preceding the year of your enrollment, the state income tax return filing status for the person(s) checked in #12a will be/was: *

Filing Status: resident non-resident part-year resident For which state? _____

* Note: Example - students who plan to enroll in 2009 should provide information on the 2008 tax year.

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