



# Application for Classification as a South Carolina Resident

Applicant's Legal Name: \_\_\_\_\_

SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Permanent Physical Address:		Current Mailing Address:	
Street:		Street:	
City:		City:	
State:	Zip:	State:	Zip:

Citizenship:  US Citizen  Permanent Resident\*  Other\* \_\_\_\_\_

\*If you are not a U.S. citizen, you must attach a copy of official documentation of your status (green card, visa).

### Dependent or Independent Status

If someone else claims you as a dependent on their income tax returns...

**OR**

If you rely on someone for more than 50% of your financial support...

If you answered "**NO**" to both questions you are an **Independent Student** (Answer Questions 1-8.)

If you answered "**YES**" to either question you are a **Dependent Student** (Answer questions 9-17. All subsequent information should be for the person who claims you, or provides your financial support.)

### Independent Students

- Residency was established \_\_\_\_\_ month \_\_\_\_\_ year  
How long have you continuously lived in the state of South Carolina? \_\_\_\_\_ years \_\_\_\_\_ months  
If less than 2 years what was your state of previous residence? \_\_\_\_\_
- In which state did you file income tax returns last year? \_\_\_\_\_  
How many consecutive years have you filed taxes in that state? \_\_\_\_\_
- Are you a legal resident of Berkeley, Charleston, or Dorchester County?  Yes  No  
If yes, residency was established \_\_\_\_\_ month \_\_\_\_\_ year
- Do you have a driver's license or state issued ID?  Yes  No  
If yes, state of issue \_\_\_\_\_ date of issue \_\_\_\_\_
- Do you own a vehicle?  Yes  No  
If yes, in what state is it registered? \_\_\_\_\_ date registered \_\_\_\_\_
- Do you own a home in SC? (principal residence only)  Yes  No  
If yes, when was it purchased? \_\_\_\_\_ Where is it located? City \_\_\_\_\_ County \_\_\_\_\_
- Are you employed full-time in the state of South Carolina?  Yes  No  
If yes, with whom? \_\_\_\_\_ Start date \_\_\_\_\_ County in which employer is located \_\_\_\_\_  
*Note: If you are basing your claim for residency on employment, you must provide a letter (on company letterhead) from the employer indicating the start date, average hours worked per week, and whether the person is eligible for benefits.*
- Are you a member of the US Armed Forces?  Yes  No If yes, what branch?  
What is your state of legal residence? \_\_\_\_\_ At which base are you currently stationed? \_\_\_\_\_  
*Note: If you are basing your claim for residency on military duty, you must provide official documentation showing where you are stationed and state of legal residence.*

**Dependent Students**

9. Who are you basing your claim for residency upon? Name \_\_\_\_\_ Relationship \_\_\_\_\_
10. Is the person a legal resident of SC?  Yes  No (Please note that a **No** response to this question does not automatically disqualify a student from consideration for in-state tuition and attendant benefits.)  
 If yes, residency was established \_\_\_\_\_ month \_\_\_\_\_ year  
 How long has this person continuously lived in the state of South Carolina? \_\_\_\_\_ years \_\_\_\_\_ months  
 If less than 2 years what was your state of previous residence? \_\_\_\_\_
11. Does this person claim you for income tax purposes?  Yes  No  
 If yes, in which state did they file \_\_\_\_\_ How many years have they claimed you? \_\_\_\_\_  
 If no, who did? Name \_\_\_\_\_ Relationship \_\_\_\_\_ State \_\_\_\_\_
12. Is the person a legal resident of Berkeley, Charleston, or Dorchester County?  Yes  No  
 If yes, residency was established \_\_\_\_\_ month \_\_\_\_\_ year
13. Does the person have a driver's license or state issued ID?  Yes  No  
 If yes, state of issue \_\_\_\_\_ date of issue \_\_\_\_\_
14. Does the person own a vehicle?  Yes  No  
 If yes, in what state is it registered? \_\_\_\_\_ date of issue \_\_\_\_\_
15. Does the person own a home in SC? (principal residence only)  Yes  No  
 If yes, when was it purchased? \_\_\_\_\_  
 Where is it located? City \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_
16. Is the person employed full-time in the state of South Carolina?  Yes  No  
 If yes, with whom? \_\_\_\_\_  
 Employment start date \_\_\_\_\_ County in which employer is located \_\_\_\_\_  
**Note: If you are basing your claim for residency on employment, you must provide a letter (on company letterhead) from the employer indicating the start date, average hours worked per week, and whether the person is eligible for benefits.**
17. Is the person currently a member of the US Armed Forces?  Yes  No If yes, what branch? \_\_\_\_\_  
 What is their state of legal residence? \_\_\_\_\_ At which base are they currently stationed? \_\_\_\_\_

**Documentation**

**The following documents may be required in order to determine residency. Not all documents will be required of all students, and some students may be required to provide additional documentation or information.**

1. Copy of Driver's License or state issued Identification Card
2. Copy of Vehicle Registration
3. Letter from employer, on official letterhead, verifying full-time employment (must include start date and average hours worked per week- if less than 37.5 hours per week, must state eligibility for full-time benefits)
4. Documentation from military indicating active-duty status and current station location
5. DEERS form proving dependency on an active-duty member of the military
6. Copy of a mortgage
7. Copy of federal income tax form from the previous year
8. Copy of South Carolina income tax form from the previous year
9. Affidavit of Financial Independence
10. South Carolina professional practice license
11. Military discharge paperwork (form DD214)
12. Other \_\_\_\_\_

This form must be completed prior to meeting with a residency officer.

If you would like to fax this application, along with required documentation from the list above, you may.

Fax: 843.574.6483

For more information, please visit [www.tridenttech.edu/admissions](http://www.tridenttech.edu/admissions) or call 843.574.6558.