

Northwestern

UNDERGRADUATE FINANCIAL AID

2016-17 Dependent Student Illinois Residency Verification Form

The Illinois Student Assistance Commission (ISAC) requires that all recipients of the Monetary Award Program (MAP) grant be residents of the State of Illinois. The Office of Undergraduate Financial Aid must ensure that all MAP recipients meet the Illinois residency requirements. For an independent student to be considered an Illinois resident the student is required to complete the Free Application for Federal Student Aid (FAFSA) and must physically reside in Illinois and Illinois must be his/her true, fixed, and permanent home. Please complete and sign this form, attach the appropriate documentation and return to our office as soon as possible.

A. Student Information:

Student Name: _____ NU ID: _____

Permanent Address: _____

Student Email: _____ Student Phone: _____

B. Documentation

Please provide one of the following items listed below to verify Illinois residency. Be sure to mark the documentation with the student name and ID number. Please check the box indicating which type of documentation you are providing attached to this signed and completed form:

- | | |
|--|---|
| <input type="checkbox"/> Illinois Driver's license | <input type="checkbox"/> Auto registration card |
| <input type="checkbox"/> 2015 W-2 | <input type="checkbox"/> Residential lease |
| <input type="checkbox"/> 2015 Tax Return Transcript | <input type="checkbox"/> Statement of Benefits: Illinois Dept Employment Security |
| <input type="checkbox"/> Utility bill | <input type="checkbox"/> Statement of Benefits: Illinois Public Aid |
| <input type="checkbox"/> State of Illinois Identification Card | <input type="checkbox"/> Voter registration card |

Certification Statement: Signing this form certifies that all of the information provided is accurate and complete. If requested, I agree to provide additional proof of information I have provided on this form.

Student's Illinois Residency Confirmation

I _____ have been an Illinois resident since: _____ / _____.
Student Name *Month* *Year*

Student Signature

Date