

SECTION II — HISTORICAL RESIDENCE DATA

NAME OF PARENTS (Legal Guardian*) _____ TELEPHONE _____

ADDRESS OF PARENTS (Legal Guardian*) _____

(number)

(street)

(apt. number)

(city)

(state)

(country)

(zip code)

IS YOUR PARENTS'/GUARDIANS' RESIDENCE YOUR PERMANENT HOME? Yes No

If no, when did parents'/guardians' residence cease to be your home? _____
(month, year)

ARE YOU REGISTERED TO VOTE? Yes No If yes, where? _____
(city) (state)

WHEN DID YOU LAST VOTE? _____ WHERE? _____
(city) (state)

DO YOU HAVE A DRIVER'S LICENSE? Yes No If yes, from which state? _____

DO YOU OWN OR USE A MOTOR VEHICLE? Yes No If yes, from which state is the vehicle registered? _____

DO YOU OWN ANY REAL PROPERTY? Yes No If yes, what type? _____
(residence, farm, etc.)

LOCATION OF PROPERTY _____
(city) (state/country)

WHEN DID YOU FIRST RESIDE IN INDIANA? _____
(month) (day) (year)

IF YOU LEFT INDIANA FOR EMPLOYMENT OR SCHOOL, WHEN DID YOU RETURN ON A PERMANENT BASIS? _____
(month) (day) (year)

LIST ALL ADDRESSES WHERE YOU HAVE RESIDED IN THE PAST FOUR YEARS.

Dates (month/year)		Street	City	State
From	To			

SECTION III — MARITAL DATA

WHAT IS YOUR MARITAL STATUS? Single Married

DATE OF MARRIAGE _____ PLACE OF MARRIAGE _____
(month) (day) (year) (city) (state)

NAME OF SPOUSE _____
(first) (middle) (last) (former name)

IS SPOUSE CURRENTLY ENROLLED AT I.U.? Yes No PREVIOUSLY ENROLLED? Yes No If yes, which campus? _____

SPOUSE'S UNIVERSITY IDENTIFICATION NUMBER _____

SPOUSE'S ENROLLED NAME, IF DIFFERENT THAN ABOVE _____

IS SPOUSE ENROLLED AT ANY OTHER INSTITUTION? Yes No If yes, _____
(institution) (location)

IS SPOUSE CURRENTLY EMPLOYED? Yes No If yes, is spouse employed in Indiana? Yes No

Beginning date (month/year)	Employer	City	State	Full- or Part-time

*Requires legal proof of guardianship.

SECTION IV — EDUCATION AND EMPLOYMENT DATA

WHAT IS YOUR PRESENT/FUTURE CAREER OBJECTIVE? _____

LIST DATES OF ATTENDANCE, ADDRESSES, AND DEGREES RECEIVED (IF APPLICABLE) FROM ALL HIGH SCHOOLS, COLLEGES OR

SECTION VI — PERSONAL STATEMENT (Required)

This statement should detail your claim to resident student status.

Please provide the following information:

1. Any indication of your purpose for coming to Indiana and your reason(s) for remaining in the state.
2. Any unusual or special circumstances regarding your request for reclassification.
3. Any other relevant information not included in any of the above categories.

Please attach additional, clearly marked pages if the space provided is insufficient for your needs.

SECTION VII — CERTIFICATION (Unsigned applications will be returned.)

Upon request, I will provide additional materials required to substantiate all facts and statements contained in this application. I understand that a student or prospective student who shall knowingly provide false information or shall refuse to provide or shall conceal information for the purpose of improperly achieving resident student status shall be subject to the full range of penalties, including expulsion, provided for by the University, as well as to such other punishment which may be provided by law.

(Student's signature)

(date)