

WEST VIRGINIA RESIDENCY APPLICATION (RO-03/22)

Registrar's Office • 200 High Stree@lenville, WV 26351 • 304-462-4117 • FAX 304-462-861@gistrar@glenville.edu

An application for West Virginia residency must be submitted to the Registrar's Office prior to the semester in which the stident is seeking residency status.

Student Name		GSU ID#
Present permanent home addr	ress	
Home PH#	Cell PH#	
Semester applying for WV resi	dency: Fall 'Spring 'Summer \	Year
Currently enrolled at Glenville	State University? Yes ' No	
Previously enrolled? Yes '1	No Future enrollment? Date:	
DEPENDENCY INFORMATIO	N: (check only one)	
Personal independence De	ependency on parent/guardian/spouse	
	: Indicate the dates and tach supporting to prove at least twelve this of continued date of this application.	
From to	Address	
From to	Address	
month employment period beir	N: Indicate the dates and tach require ng used as the basis for this application.	
	City, State	
ADDITIONAL SUPPORTING I	City, State NFORMATION: Below are examples ve checkyees on any of the examples be tion of any of the actions below does no	of what may be used as partial low, youst attach ot guarantee reclassification.
Do you own residential propert	-	* Wees
Have you paid West Virginia re	eal or persb p æperty taxes during the pa	
Have you filed a West Virginia	income tax return during the past 12 m	
Do you have a vehicle register	ed in West Virginia?	N/ces
Do you have a valid West Virgi	inia driver's license?	Mes
Are you a registered voter in the	ne state of West Virginia?	N/œs
Are you married to a West Viro	rinia rosidont?	N/asc

Provide a written statement explaining you claim to resident student status.				
I hereby attest that this information and accompanying documenta authorize its verification and use by Glenville Stateversity for purpose	tion is completely true and accurate, and oses of reviewing this application.			
Applicant's Signature	Date			
Parent/Guardian Signature (Only applicable if seeking resident status on the basis of a parent	Date /guardian/spouse)			
OFFICE USE ONLY:				
Residency Approved Residency Denied				
Reviewer's Signature	Date			