



Colorado Residency Questionnaire

Your financial aid award includes funding from the State of Colorado. As a result, we are required to document your residency with the following information. Please complete and return this form to the Financial Aid Office at Colorado College with proof of lawful presence documentation.

Please indicate which Proof of Lawful Presence documents you will submit with this form:

- Colorado Driver's license or state ID card
- Colorado Vehicle Registration Card
- Colorado High School Diploma
- Colorado Voter Registration Card
- U.S. Military ID card or military dependent ID card
- Proof of Ownership of Residential (Real Property in Colorado (NOT Vacation or Income property
- Colorado Tax Return (Parent)
- Proof of Permanent Employment in CO

Personal Information

Student's Full Legal Name: _____
Last First Middle

Social Security Number _____

Date of Birth _____ Age _____ (If you are older than 22, please contact our office)

Place of Birth _____ Emancipated: No Yes (Attach affidavit)
State

Never Married Divorced/Annulled Married Date of Marriage _____

Home Address:

Number and Street City

County State Zip Phone Number

Additional Information

Graduated from a Colorado high school? Yes No Date Graduated: _____

Name and Location of High School:

Name _____ City _____ State _____
 Successfully home schooled in Colorado? Yes No Date Completed: _____
 Driver's License Number or State Identification Card Number: _____
 State of Issue _____ Renewal? Yes No
 Registered to vote in the U.S.? Yes No State of Registration _____
 Are you a U.S. Citizen? Yes No

If you are not a U. S. Citizen, please provide the following information:

Country of citizenship _____

Do you have a U.S. Visa? Yes No U.S. Visa Type _____

Visa Number _____ Expiration Date _____

U. S. Coast Guard Merchant Mariner Card _____

Native American Tribal Document Number _____

(Please include a copy of your identification information listed above)

The Following section has been completed with information pertaining to my:

Parent _____ Legal Guardian _____ (attach proof of guardianship)

Name of Parents/Guardians:

Last	First	Middle
Last	First	Middle

List the addresses where your parents/guardians physically resided during the past 12 months:

Number and Street	City	State	Month/year to Month/year
Number and Street	City	State	Month/year to Month/year

Is a home maintained in another state? Yes No Which State? _____

Is your Parent/guardian in the military service? Yes No Which Branch? _____

Military base where parents are assigned: _____
 (Attach signed verification from the Base Education Officer of current active-duty station)

List the state where your parents filed state taxes during the past two years:

State _____ Year _____ Full year resident Partial year resident

State _____ Year _____ Full year resident Partial year resident

I hereby certify that, to the best of my knowledge, the information furnished is true and complete, without evasion or misrepresentation. I understand that if it is found to be otherwise, it is sufficient cause to disqualify me for State of Colorado Financial Aid Programs from the institution.

Signature (Applicant)

Date

Parent or Guardian Signature (if applicant is under 23)

Date

For Colorado College Use Only

Proof of lawful presence has been proven to Colorado College by the submission of:

The Colorado Residency Questionnaire in addition to all accompanying documentation has been reviewed by a member of the Colorado College Financial Aid Department and has been:

Approved Denied Requires additional information

Comments: