

Required for Accuplacer

# HIGH SCHOOL PERSONAL INFORMATION / RESIDENCY FORM

## PERSONAL INFORMATION: PLEASE PRINT

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Maiden Name \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

SSN# \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex: \_\_\_\_ Male \_\_\_\_ Female

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Name of High School \_\_\_\_\_ Anticipated Graduation Date \_\_\_\_/\_\_\_\_/\_\_\_\_

### Please answer questions 1, 2 AND 3 below:

1. **Race/Ethnicity- SELECT AS MANY AS APPLY**  American Indian/Alaskan  Asian  Black/African American  
 White  Native Hawaiian or other Pacific Islander Other \_\_\_\_\_

2. **Are you Hispanic/Latino?**  Yes  No

3. **Are you a veteran of the U.S. Armed Forces?**  Yes  No

### 4. REQUIRED INFORMATION - Choose ONE only

a) Are you a United States citizen?  Yes  No IF YES, GO TO BOX 5; if no continue to next question

OR

b) Are you a Permanent Resident?  Yes  No IF YES, LIST ALIEN REGISTRATION NUMBER: \_\_\_\_\_, if no go to next question

OR

c) If you are not a U.S. Citizen or Permanent Resident, please state your Visa or immigration status in detail: \_\_\_\_\_  
\_\_\_\_\_ Home Country \_\_\_\_\_

### 5. REQUIRED - If you are a US citizen or permanent resident, select A or B or C.

A.  I have been a Massachusetts resident for six (6) continuous months and intend to remain here.

As proof of my intent to remain in Massachusetts, I possess at least 2 of the following documents, which I shall present to the institution upon request. These documents\* are dated within one (1) year of the start date of the academic semester for which I seek to enroll (except possibly for my high school diploma). The institution reserves the right to make any additional inquiries regarding the applicant's status and to require submission of any additional documentation it deems necessary. Please check-off those documents you possess as proof of your intent to remain in Massachusetts.

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Valid Driver's license                                 | <input type="checkbox"/> Utility bills*                | <input type="checkbox"/> Employment pay stub*       |
| <input type="checkbox"/> Valid Car registration                                 | <input type="checkbox"/> Voter registration*           | <input type="checkbox"/> State/Federal tax returns* |
| <input type="checkbox"/> Mass. High School Diploma                              | <input type="checkbox"/> Signed lease or rent receipt* | <input type="checkbox"/> Military home of record*   |
| <input type="checkbox"/> Record of parents' residency for unemancipated person* | <input type="checkbox"/> Other _____                   |   |

B.  I am a member of the armed forces (or spouse or unemancipated child) on active duty in Massachusetts.

C.  I am not a Massachusetts resident as defined in 5A. My home state is \_\_\_\_\_.

\* only need 1

### CERTIFICATION

I certify that this information is true and accurate. I understand that any misrepresentation, omission or incorrect information shall be cause for disciplinary action up to dismissal, with no right of appeal or to a tuition refund.

Student Signature: \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature (Student is Under 18 Years Old): \_\_\_\_\_ Date \_\_\_\_\_

### FOR OFFICIAL USE ONLY — DO NOT WRITE IN THIS BOX

I have reviewed the above information in order to determine the individual's eligibility to receive the in-state tuition rate. Based on my review, I have determined that this individual:

- IS eligible for the in-state rate
- IS NOT eligible for the in-state tuition rate
- I am not able to make the determination at this time. The following information has been requested of the applicant:

Authorized College Personnel: \_\_\_\_\_ Date: \_\_\_\_\_