

## **REQUEST TO CHANGE RESIDENCY STATUS**

Mail or personally deliver completed form and documentation to:

Hawkeye Community College Records & Registration 1501 East Orange Road PO Box 8015 Waterloo, IA 50704-8015

Hawkeye ID #:					
Name:			Phone Number:		
(Last)	(First)		(MI)		
Address:(Number & Str	eet)	(Apt. #)	(City & State)	(Zip)	
Please initial after each stater	nent below.				
<ul> <li>I have resided here for a attending (init</li> <li>I am providing supporting</li> </ul>	ial)	ety (90) days prior owa residency (Se	to the first day of the seme e list of acceptable documer		
Please note that a student cain lowa for the purpose of at				nother state and you are living	
• •	l evidence of residency, I a	ım asking to be cla	ssified as a resident of Iowa	for tuition and fee purposes. I	
(Signature o	f Applicant)		(Dat	re)	
At least two dated documents from one of the items listed in documents must be submitte re-classified once the semeste	n 1 through 5 below. The s d <b>prior to the first day of</b> t	econd document y	ou must provide may be fro	om 1 through 7. These	
4. lowa voter registra 5. Proof of lowa Home 6. Written and notariz 7. Other indicators of utility bills, bank stat	ation form  Eax return, signed and date  Cion card  Estead credit on property  Eed documentation from a  Llowa residency, such as ap	taxes n employer that yo partment lease dat nowing your lowa a	ou are employed in lowa ed and signed by both you a address. (No two of these ite	_	
-	<del>-</del>	e form of a copy of	of the following: an I-94 card showing appro	priate status OR	
OFFICE USE ONLY: I have reviewed this student's	application for lowa resid	lency status and ha	ave taken the following action	on:	
Request Approved		equest Denied (see	_		
(Signature a	nd Title of Official)		(Dat		