



## 2017-2018 Illinois Residency

Student Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

The Illinois General Assembly has mandated that students (or their parents) must provide documentation of their Illinois residency in order to be eligible for the State of Illinois Monetary Award Program (MAP) Grant. We need to verify your state of residency to determine your eligibility for the MAP Grant.

**Dependent Student (you were required to provide parental information on your FAFSA):** The custodial parent(s) of a dependent student must reside in Illinois on the date the Free Application for Federal Student Aid (FAFSA) was submitted in order to be considered an Illinois resident. You must provide one of the documents listed below that shows your parent was an Illinois resident on or before that date.

Check the document being submitted and attach to this form (**only one is required**):

- Statement of benefits from the Illinois Department of Employment Security
- Parent's Illinois driver's license or Illinois ID card
- Parent's utility bill (Electricity, Gas, or Water)
- Signed copy of Parent's State tax returns for 2016

Parent is not an Illinois Resident.

**Independent Student (you were not required to provide parental information on your FAFSA):** An independent student must have resided in Illinois for a minimum of 12 consecutive months immediately prior to the first day of the academic year in order to be considered an Illinois resident. The student must be able to document 12 continuous months of Illinois residency with one or more of the documents listed below.

Check the document being submitted and attach to this form (**only one is required**):

- 12 months' statement of benefits from the Illinois Department of Employment Security
- Student's Illinois driver's license or Illinois ID card (**if valid and issued on/before August 21, 2016**)
- Signed copy of Student's State tax returns for 2016

1. Have you lived in Illinois for the past 12 consecutive months prior to August 21, 2017? Yes\_\_\_\_\_ No \_\_\_\_\_

2. Month/year you became an Illinois resident: \_\_\_\_\_

I am not an Illinois Resident.

**I certify that the information I have provided about my Illinois residency is accurate and complete, to the best of my knowledge.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature (if dependent)

\_\_\_\_\_  
Date