

Date Received _____

**NORTHWEST MISSOURI STATE UNIVERSITY
PETITION FOR RESIDENT FEES
EMANCIPATED STUDENTS**

(Priority Deadline for Petition and All Supporting Documents:
Friday before the first day of the Trimester)

PERSONAL DATA

1. Name _____ Age _____

2. Are you a U.S. Citizen (circle one)? Y / N

3. Northwest ID Number: 919 _____

4. Permanent Address _____

Street

City

State

Zip

Telephone _____ Resident Fees desired beginning (session/year) _____

5. List your places of residency during the past three years:

<u>Address</u>	<u>Dates</u> From	To
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

How long do you intend to remain in Missouri?

IMPORTANT:

If you have lived somewhere in the state of Missouri, other than the Northwest Missouri State University residence halls, in the last twelve months, please attach rent receipts or other documentation of your residency. ****A full, consecutive 12 months needs to be documented.**

6. List your attendance at colleges and universities in the state of Missouri during the past three years (including Northwest):

School	Semester or Session	No. of hours for which enrolled
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. Where did you spend the last Christmas break?

Place _____	Number of Weeks _____
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Where did you spend the last summer (May through August)?

Place _____	Number of Weeks _____
_____	_____

Where did you spend the last spring break?

8. Marital Status: Single _____ Married _____ Date of Marriage _____

If married, spouse's name _____

Is spouse a Missouri resident? Yes _____ No _____

Is spouse enrolled at Northwest? Yes _____ No _____

Part-time _____ Full-time _____

9. Parent or Guardian:

Name _____

Address of Parent or Guardian _____
Street

City	State	Zip
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10. Are you a registered voter in Missouri? Yes _____ No _____

****If yes, attach copy of registration.**

11. Do you have a vehicle titled in your name? Yes _____ No _____

If Yes, in what state? _____

12. ****YOU MUST HAVE A MISSOURI DRIVER'S LICENSE. PLEASE ATTACH A COPY OF LICENSE.**

FINANCIAL DATA

NOTE: A change to resident fees may change the amount and type of financial aid for which you are eligible. Please check with the Office of Scholarships and Financial Assistance for details.

1. From what persons, businesses, or agencies do you receive your support? (Include salaries, interest, dividends, gifts, loans, grants, etc.) ****Documentation necessary, must be in the amount of \$6,000 from Missouri and Federal sources within the past 12 months.**

Name	Address	Type of Income	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. Employment record (list your employers and ****attach supporting documents such as W-2 or earnings statement).**

Employer	Address	Amt. Earned	Dates Employed
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. If married, spouse's employment record:

Employer	Address	Amt. Earned	Dates Employed
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. Did you or your spouse file a Missouri income tax return for the last income tax year?

Yes _____ No _____ ****If yes, attach a copy of your state tax return.**

Have you or your spouse paid any Missouri property taxes?

Yes _____ No _____ ****If yes, attach tax receipt.**

RETURN FORM TO:

Office of Admissions
Administration Building – 2nd Floor
Northwest Missouri State University
Maryville, MO 64468

NOTE: All items marked with ** are necessary documentation for petition. Failure to turn in all documentation prior to the start of classes could result in denial.

APPLICANT'S SIGNATURE

DATE

****PARENT/GUARDIAN CERTIFICATION**

Applicant Name: _____

Northwest ID Number: 919_____

- 1. We, the parents /guardians of applicant, will _____, will not _____, claim the applicant on our Federal Income Tax statement for the current year.
- 2. **We, the parents or guardians of applicant, did _____, did not _____, claim the applicant in the last income tax year.** If requested, we agree to send an official copy of our last Federal Income Tax Return obtained from the appropriate district office of the United States Internal Revenue Service. The last year I/we claimed the applicant was on our _____ Federal Income Tax Return.

(Please fill in the information requested in BOTH #1 and #2 above.)

Signature of applicant’s Parent/Guardian	Signature of applicant’s Parent /Guardian
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Address	Address
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City	State	City	State
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Date_____

Subscribed and sworn before me this_____ day of _____, 20_____.

Notary Public