

**NORTHWEST MISSOURI STATE UNIVERSITY  
PETITION FOR RESIDENT FEES  
FOR UNEMANCIPATED OR MARRIED STUDENTS**

Date Received: \_\_\_\_\_

This form must be completed in full, notarized, and received by the Office of Admissions prior to the start of the trimester for which the petition is made, with all supporting documents.

**STUDENT INFORMATION**

Name \_\_\_\_\_ Age \_\_\_\_\_ Northwest ID Number: 919 \_\_\_\_\_

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

Address \_\_\_\_\_  
Street City State Zip Phone

Dates of enrollment at Northwest: \_\_\_\_\_ Resident Fees desired beginning (session/year) \_\_\_\_\_

**INFORMATION BELOW TO BE COMPLETED BY PARENT, GUARDIAN OR SPOUSE**

Name of parent, guardian, or spouse \_\_\_\_\_

If guardian, date of court appointment \_\_\_\_\_ court location \_\_\_\_\_

Did you claim the student as a dependent on your last income tax return? \_\_\_\_\_

**\*\*PLEASE ATTACH A COPY OF THAT INCOME TAX RETURN.  
\*\*IF MARRIED, PLEASE ATTACH COPY OF MARRIAGE CERTIFICATE.**

Is your domicile presently with the State of Missouri? \_\_\_\_\_

If so, on what date did you relocate to Missouri? \_\_\_\_\_

If so, what is your current address? \_\_\_\_\_

Do you own or rent your home? \_\_\_\_\_

Are you and/or your spouse employed full-time within the State of Missouri? \_\_\_\_\_

If so, where are you employed? \_\_\_\_\_

On what date did your Missouri employment begin? \_\_\_\_\_

**\*\*PLEASE PROVIDE DOCUMENTATION OF YOUR DOMICILE AND EMPLOYMENT  
WITHIN THE STATE OF MISSOURI, AND A COPY OF YOUR MISSOURI DRIVERS LICENSE.**

Are you presently serving in the military? \_\_\_\_\_

If so, where are you now stationed? \_\_\_\_\_

What state is your official "Home of Record"? \_\_\_\_\_

**\*\*PLEASE PROVIDE DOCUMENTATION ON WHERE YOU ARE STATIONED (IF  
MISSOURI) OR ON YOUR "HOME OF RECORD" (IF MISSOURI).**

I hereby certify that the above information and enclosed documentation is complete and accurate.

\_\_\_\_\_  
Parent, guardian, or spouse's signature

*(Form Must Be Notarized)*

**BELOW FOR USE BY NOTARY PUBLIC**

Subscribed and sworn before me in the City of \_\_\_\_\_, State of \_\_\_\_\_,  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. My commission expires: \_\_\_\_\_.

\_\_\_\_\_  
Notary Public Signature