

OZARKS TECHNICAL COMMUNITY COLLEGE

PETITION FOR CHANGE OF RESIDENCY STATUS FOR FEE PURPOSES

Name: _____ Student ID: _____
Last First MI

Residential Address: _____
Address City State Zip

Phone: (____) _____ - _____ Date of Birth: _____ / _____ / _____

Please check the category you are requesting:

_____ **In-district** students have lived in the state of Missouri for at least one year and in one of the Missouri school districts for the past three months. These students or their parents pay personal property taxes to OTC and are entitled to the lowest tuition rate.

_____ **Out-of-district** students do not live within the taxed districts but have lived within Missouri or Arkansas counties listed below for the past year.

_____ **Out-of-state** students maintain permanent residency outside of the state of Missouri or selected Arkansas counties.

Documents needed for "proof of residency":

- A. You must provide a copy of your valid **Missouri Driver License or State Identification Card, or Arkansas Driver License or Identification card** if you reside in selected Arkansas counties that qualify for out-of-district. The address on the license or identification card must correspond **with the address the student is using to establish residency**.
- B. You must submit a copy of the first page of your parent or guardian's tax return if you are under 21 years old. **NOTE:** If you are under the age of 21, and your parent(s) or guardian(s) claimed you on their tax return, your residency will be determined based upon the state and school district in which your parent(s) or guardian(s) reside.
- C. You must provide OTC with copies of **at least two** of the following items. The documentation must be dated such to prove residency (12) months prior to the start of the semester for students requesting change from out-of-state and (3) months prior for students moving from out-of-district. Current statements are insufficient documentation
 - _____ Lease agreement/home purchase agreement in your name with current address
 - _____ Personal property tax receipt in your name
 - _____ Utility bill in your name for residence being submitted
 - _____ Bank statement in your name with residence address
 - _____ Voter registration card with residence address
 - _____ Paystub or W2's in your name with residence address
- D. Military service may allow a waiver of the time requirement. Orders and/or Discharge papers will be required.
- E. Work relocation may waive the required time component. A letter on company letterhead detailing transfer from your supervisor is required.

All classifications of residency are determined at the time of application. Students classified as International status must provide additional specific documentation for review. Requests for change of residency must be completed before the end of the first week of the semester. Any requests received after the first week will not be in effect until the following semester. Reclassification of residency is not retroactive and will not affect prior terms of enrollment. Contact Student Services at 417-447-6900 or email residency@otc.edu from your OTC student email address with any questions.

I affirm/attest that the information and accompanying documentation included herein is true and accurate.

_____/_____/_____
STUDENT SIGNATURE DATE

Please return this petition and required documentation to Student Services at any OTC Campus or Education Center.

Office of the Registrar 12/2021

For Office Use: Approved by: _____ Date: _____ System Adjusted: _____
