



2023-2024

Date/State of Legal Residence Form

Student Name: _____

COTC ID:

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The following information is needed by COTC to determine your residency. The State of Legal Residence reported on the FAFSA (Free Application for Federal Student Aid) differs from what was reported on the COTC admissions application, or a portion of the question was blank on the FAFSA. Complete the information below and return it to Student Financial Services.

State of Legal Residence: _____

Date you became a legal resident: _____ / _____
Month Year

Student Signature **(DO NOT SIGN ELECTRONICALLY)** _____ Date _____

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sent to prison, or both.

TO RETURN THIS FORM: Email to: NWK-studentfinancialservices@mail.cotc.edu (or) Fax to: 740-364-9533 (or) Mail to: COTC, Student Financial Services, 1179 University Dr, Newark OH 43055

Office Use only

____ Independent Student. ____ Datatel Residency (O, R, RC)

____ Dependent Student ____ Datatel Residency (O, R, RC)

____ Parent State of Residency _____ Date of Residency

* If IND and state of residency = OH and Datatel Residency = R or RC, do not send to Gateway.

* If IND and state of residency <> OH and Datatel Residency = R or RC, **send copy to Gateway.**

* If DEP and state of residency = OH and/or Parent Residency = OH, and Datatel Residency = R or RC, do not send to Gateway.

* If DEP and state of residency = OH and/or Parent Residency <> OH, and Datatel Residency = R or RC, **send copy to Gateway.**

* If DEP and state of residency <> OH and/or Parent Residency <> OH, and Datatel Residency = R or RC, **send copy to Gateway.**

☐ Forwarded copy of form to the Manager of Gateway Student Records _____ / _____
Advisor Initials and Date

Reviewed by: