Residency Evaluation

Print Name:	Student ID #
Current Address:	
How long have you lived at current ad	ldress?
The Residency Evaluation form along with no later than the following deadlines: • Fall Semester – September 1 st Requested District Status:	 A all supporting documentation must be submitted to the Office of the Registrar Spring Semester – February 1st Summer Semester – June 1st In District
Nequested District Status.	III DISCHEL
Requirements:	
Taxing District for a period of 12 months	vidual, there should be sufficient proof of domicile within the Three Rivers s. There must be sufficient proof of intent to make the college district a od with continuous residence in the college district during periods not
Acceptable forms of documentation:	
the college districtProof of address within college	in the college district It upon marriage to a resident and maintenance of common domicile within district for 12 months g current address within the college district in the college district
Re	esidency Changes WILL NOT be retroactive.
For further information regarding residency, please re	efer to the current college catalog.
Student Signature:	Date:
Office use only: Approved Denied Explanation:	Student Type Updated Rebill Notification Sent
Signature:	Date:

Return to the Office of the Registrar

Email:registrar@trcc.edu Fax: 573-840-9058 Mail: 2080 Three Rivers Blvd, Poplar Bluff, MO 63901