

1115 College Drive, Gaffney, SC 29340 (800)-795-7151 • (864)-488-8231 Fax (864)-488-4596 E-mail financialaid@limestone.edu

SOUTH CAROLINA RESIDENCY FORM

The SC Tuition Grant, SC LIFE, Palmetto Fellows and SC HOPE Scholarship Programs require that all recipients certify that they are South Carolina residents to receive the before-mentioned grant and or scholarships. The initial determination of one's resident status is made at the time of admission, and any determination made thereafter prevails for each subsequent semesters until information becomes available that would affect the existing residency status and the determination is successfully challenged. The burden of proof is provided by the student.

No person is eligible for a state grant or scholarship unless he/she is domiciled within South Carolina. A person does not acquire domicile in South Carolina until he/she has been a legal resident of the state for 12 consecutive months immediately preceding registration for classes or meets state requirement for domicile.

Stuae	ent Name		Student #		
1.)	Name of parent, guardian, or po an emancipated minor; or ward		,	•	
	Relationship				
2.)	Is the person named in #1 a U.S • If NO , please attach a copy of		s the permanent resident/ immigration	status of the person named in #1	
3.)	How long has the person name	d in #1 been a legal resident o	of South Carolina? Years	Months	
4.)	What is the permanent home address (No P.O. Box) of the person named in #1?				
	Street		City	State Zip	
5.)	Has the person named in #1 be • If NO , complete the employe	en employed in South Carolin er information section below.	a over the past 12 months? YES	NO 🗌	
EMPL	OYER	CITY/STATE	DATES EMPLOYE	FULL or PART TIME	
	ACCEPTABL	E DOCUMENTS FOR PROOF C For person nam	DF SOUTH CAROLINA RESIDENCY	(
	Please select	TWO from the following list	and submit along with this forr	n:	
	• Copy of the 2024 South Card	Copy of the 2024 South Carolina state tax return (SC 1040)			
	• Copy of the South Carolina driver's license or state id (the issue date should be at least 1 year old)				
	• Copy of vehicle paid property tax bill for tax year 2024				
	 Copy of established and curr 	greement or paid property tax b	ent or paid property tax bill for 2024)		
	 Statement of full –time emp 	loyment giving dates of emplo	oyment from Human Resources	(<u>NOT</u> a paystub or W-2)	
of atten materia Limesto	e information provided by the student or any at dance at Limestone University will be cause for Il fact, condition, or circumstances affecting eligi ne University may find it necessary to request ac es and regulations promulgated by the Commiss	immediate cancellation. Any student who h bility will be subject to applicable civil or cri Iditional information to verify residency in a	as obtained funds through means of a willfully minal penalties, including retroactive loss of th compliance with the regulations as set forth by	alse statement or failure to reveal any e state funds. I understand that section 59-112-10 and all related	
Student Signature			 Date	Date	
Signa	ture of Person Named in #1 (if annli	cable)	 Date		