



2024-2025

Statement of Residency Information

Student Financial Services • 1 Ferncroft Road • Danvers, MA 01923-0840
978-762-4189

www.northshore.edu/paying/financial-services
sfs@northshore.edu

| Required (please print) | RES | <i>In order to receive state funded financial aid, you need to provide residency information. Our records indicate that you, or your parents (if applicable), did not provide this information on your Free Application for Federal Student Aid (FAFSA). Please indicate your residency below and send it back to us immediately. Residency (domicile) is your true, fixed, and permanent home. If you moved into a state for the sole purpose of attending a college, do not count that state as your legal residence.</i> | | | | | | | | | | |
|---|-----|---|---|--|--|--|--|--|--|--|--|--|
| Student ID# <table border="1" data-bbox="196 541 561 611"> <tr> <td>N</td><td>0</td><td>0</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> Last Name: _____ First Name: _____ | N | 0 | 0 | | | | | | | | | |
| N | 0 | 0 | | | | | | | | | | |

Student Information

The state where I legally reside is: _____ OF STATE _____ NAME

I have been a resident of this state since: _____ MONTH/YEAR

STUDENT'S SIGNATURE _____ DATE

IMPORTANT: If you completed the FAFSA as a dependent student, parental information and signature below are required. If you completed the FAFSA as an independent student, parental information and signature below are not required. **We cannot accept digital signatures.**

Parent Information (if dependent)

The state where my parent(s) legally reside is: _____ NAME OF STATE

My parent(s) have been a resident of this state since: _____ MONTH/YEAR

PARENT'S SIGNATURE _____ DATE