

**APPLICATION FOR SOUTH CAROLINA RESIDENT CLASSIFICATION  
FOR DEPENDENT STUDENTS AT THE COLLEGE OF CHARLESTON**

Legal Residency Office  
170 Calhoun Street  
Charleston, South Carolina 29401  
843.953.7311 and 7312  
Fax 843.953.3906  
[www.legalresidency.cofc.edu](http://www.legalresidency.cofc.edu)

Application Deadlines: July 1 (Fall) and November 1 (Spring). Deadlines for Maymester and Summer are two weeks prior to the official first day of class for that term. Application must be completed by the first day of class to be considered for that semester.

Submit application to the Legal Residency Office. Hard copies of any documents containing an original signature or Notary Public stamp are required.

Name of student \_\_\_\_\_  
Last First Middle

SS# \_\_\_\_\_ CofC ID# \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Undergraduate \_\_\_\_\_ Graduate \_\_\_\_\_ email address \_\_\_\_\_

Present address \_\_\_\_\_

Permanent address \_\_\_\_\_

Marital status \_\_\_\_\_ Date of marriage \_\_\_\_\_ Name of spouse \_\_\_\_\_

Name and address of Mother \_\_\_\_\_

\_\_\_\_\_ Mother's email \_\_\_\_\_

Name and address of Father \_\_\_\_\_

\_\_\_\_\_ Father's email \_\_\_\_\_

Semester and year of original enrollment at CofC \_\_\_\_\_

Semester and year in-state resident status is requested to begin \_\_\_\_\_

**Application for SC Resident Classification for Dependent Students  
Page Two**

Please read the requirements for dependent students on our web site, and the **Information on Dependent Students** page of this application for information on documentation to be attached to this application.

In the case of divorced or separated parents, the resident status of the dependent person may be based on the resident status of the parent who claims the dependent person as a dependent for tax purposes; or based on the resident status of the parent who has legal custody or joint legal custody of the dependent person; or based on the resident status of the person who makes payments under a court order for child support and at least the cost of his/her college tuition and fees. (Copy of divorce decree may be requested, if applicable)

Name and relationship of person(s) who claimed you as a dependent on their income taxes for the previous tax year \_\_\_\_\_

Name and relationship of person(s) who will claim you as a dependent on their income taxes for the current tax year \_\_\_\_\_

**I am requesting resident status based on the provision that:**

\_\_\_ I am the dependent or spouse of a person who has physically resided and established a permanent home in South Carolina for at least twelve months prior to the term I am requesting resident status.

\_\_\_ I am the dependent or spouse of a person who has physically resided and established a permanent home in South Carolina for less than the twelve months prior to the term I am requesting resident status, but is employed full time in the state.

\_\_\_ I am the dependent or spouse of a person who has physically resided and established a permanent home in South Carolina for less than the twelve months prior to the term I am requesting resident status, but is retired and receives a monthly pension.

\_\_\_ I am the dependent or spouse of a person who is a full-time employee of another state of South Carolina institution of higher learning. (Attach letter).

\_\_\_ Other (Explain)

**STUDENT'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**Legal Residency Office**  
College of Charleston  
Charleston, SC 29424  
Phone: 843-953-7311 and 7312  
Fax: 843-953-3906

**CERTIFICATE OF SOUTH CAROLINA PARENT'S RESIDENCY**

Form will be returned if not completed and notarized.

Faxes are acceptable if hard copy is mailed immediately after faxing.

I, parent of \_\_\_\_\_, student's SS# \_\_\_\_\_,  
declare under oath this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, that I reside at and my principal  
residence is located at \_\_\_\_\_  
\_\_\_\_\_. I also declare that I provide more than half of my  
son/daughter's support, and claimed/did not claim him/her as a dependent on my \_\_\_\_\_ (previous year) federal  
tax return. I also filed my \_\_\_\_\_ (previous year) state income taxes as a resident of \_\_\_\_\_. To verify  
the above statements I have attached copies of pages 1 & 2 of these returns, financial information marked out.

I understand that if my son/daughter is granted resident status prior to and dependent upon my filing for the  
current year (\_\_\_\_\_), I agree to file a SC Resident tax return and claim my son/daughter as a dependent  
on my federal return, providing the Legal Residency Office with copies or a copy of my extension by April 15.  
I further agree that if these copies are not received, I am responsible for the difference of the out-of-state fees  
retroactive to the term in which resident status was granted, and further agree to pay said difference upon  
receipt of a statement from The College.

**NOTARY PUBLIC STAMP AND SEAL**

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Printed name of Parent

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I, parent of \_\_\_\_\_, student's SS# \_\_\_\_\_,  
declare under oath this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, that I reside at and my principal  
residence is located at \_\_\_\_\_  
\_\_\_\_\_. I also declare that I provide more than half of my  
son/daughter's support, and claimed/did not claim him/her as a dependent on my \_\_\_\_\_ (previous year) federal  
tax return. I also filed my \_\_\_\_\_ (previous year) state income taxes as a resident of \_\_\_\_\_. To verify  
the above statements I have attached copies of pages 1 & 2 of these returns, financial information marked out.

I understand that if my son/daughter is granted resident status prior to and dependent upon my filing for the  
current year (\_\_\_\_\_), I agree to file a SC Resident tax return and claim my son/daughter as a dependent  
on my federal return, providing the Legal Residency Office with copies or a copy of my extension by April 15.  
I further agree that if these copies are not received, I am responsible for the difference of the out-of-state fees  
retroactive to the term in which resident status was granted, and further agree to pay said difference upon  
receipt of a statement from The College.

**NOTARY PUBLIC STAMP AND SEAL**

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Printed name of Parent

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**OUT-OF-STATE PARENT AFFIDAVIT** (Use only if one parent is not a SC resident.)

This form is required if student is under 24, or is over 24 and has received financial assistance from parent. Form will be returned if not completed and notarized. Faxes are acceptable if followed by hard copies.

I, parent of \_\_\_\_\_, Student SS# \_\_\_\_\_, hereby announce and declare this \_\_\_\_ day of \_\_\_\_\_, that I contributed \$\_\_\_\_\_ to the support of my son/daughter during the twelve consecutive months immediately preceding the semester he/she is requesting resident status (includes tuition and PLUS loans). I last claimed him/her on my 20\_\_ Federal income tax return, but will not claim him/her on my 20\_\_ (current year) or 20\_\_ (following year) returns, nor will I provide more than half of his/her total support for the current and succeeding tax years while attending the College of Charleston, should he/she be approved to pay in-state rates as an independent South Carolina resident.

Attach a copy of your previous year's Federal tax return (pages 1 & 2, with financial information and SS#s marked out) if you did NOT claim student.

I understand that if my son/daughter is granted resident status prior to and dependent upon my filing my Federal Income tax return for the current tax year, 20\_\_, I agree to provide the Legal Residency Office with a copy or a copy of my extension by April 15, 20\_\_. I further understand that if it is not received by April 15, my son/daughter is responsible for the non-resident fees retroactive to the term he/she was granted resident status.

**NOTARY PUBLIC STAMP AND SEAL**

\_\_\_\_\_  
Printed name of parent

\_\_\_\_\_  
Street address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Signature of parent

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Charleston, SC 29424  
843/953-7311/7312

**CERTIFICATE OF INDEPENDENT SPOUSE'S RESIDENCY**

(Use only if student is married, and applying as a dependent spouse.)

(Form will be returned if not completed and notarized.)

I, \_\_\_\_\_, spouse of (student) \_\_\_\_\_  
(SS# of student) \_\_\_\_\_ declare under oath this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_, that I reside at and my principal residence is located in South Carolina. I also declare  
that I provide more than half of my spouse's support, and filed my \_\_\_\_\_ (previous tax year) state  
and federal income taxes jointly with/without my spouse, as a resident of \_\_\_\_\_. To verify  
the above statements, I have attached photocopies of these returns.

I understand that if my spouse is granted resident status prior to and dependent upon my filing for  
the year \_\_\_\_\_ (current tax year), I agree to file joint SC Resident and Federal tax returns, and  
provide the Legal Residency Office with these copies or extension form by April 15. I further  
agree that if these copies are not received by April 15, I am responsible for the difference in the  
non-resident fees retroactive to the term for which resident status was granted. I further agree to  
pay said difference upon receipt of statement from the College.

**NOTARY PUBLIC STAMP AND SEAL**

\_\_\_\_\_  
Printed name of spouse

\_\_\_\_\_  
Street address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Signature of spouse

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**INFORMATION ON DEPENDENT STUDENTS OF SOUTH CAROLINA RESIDENTS**

"Dependent Person" is defined as one whose predominant source of income or support is from payments from a parent, spouse, or legal guardian and who qualifies for and is claimed as an exemption on the Federal income tax return of the parent, spouse, or legal guardian. A dependent person is also one for whom payments are made, under court order, for child support and the cost of the dependent person's college education.

If a non-resident student's parent(s) or spouse, who claims the student as a dependent for income tax purposes, lives or moves into the State, the student may be eligible for resident status by meeting the following guidelines and submitting the following forms, affidavits, and documentation to the Legal Residency Office:

- 1) Student application for resident status. (Student completes.)
- 2) If one or both parents, or spouse have resided and established a domicile in South Carolina for less than the previous twelve months and their physical presence in the state is continuous and permanent, they must be:
  - a) Employed full-time in the State, and continue to be employed full-time until the twelve-month requirement is met. A letter from the employer on official company stationery, must be provided to confirm full-time status and the date such employment began. **(This documentation may also be requested if there is any question as to how long they have resided in the state, i.e., SC driver's license is less than a year old.)** Self-employed persons must submit a SC Business License containing parent's name, or license application that does, plus license.
  - b) Or Retired, residing in South Carolina, AND receiving a pension or annuity.
- 3) Copies of valid SC driver's licenses, voter registration cards, motor vehicle registration certificates, (and permanent resident cards or visas from parents or spouse and student, if applicable), and SC driver's license from student.
- 4) If parents or spouse filed previous year's SC Resident taxes, copies of parents' or spouse's previous year's state return to verify taxes paid as SC residents. Previous year's Federal returns are required regardless of where state taxes were paid to verify dependency of student.
- 5) Affidavit(s) in which parents or spouse agree to file State and Federal income taxes as Residents of SC (a Non-resident SC return is acceptable the first year of filing, ONLY when accompanied by a Part-Year return from the former state), and claim student as dependent on the Federal return. If one natural parent is a resident of another state, an affidavit and Federal income tax return is required from that parent, stating that parent does not and will not claim student while student is attending the College.
- 6) Student's addresses on file with the College are in SC. (Student can change on Cougar Trail.)

The dependent student and parent(s) are expected to abandon all prior domiciles and ties with the former state which may be considered evidence of permanent residence.

**APPLICATION DEADLINES:** July 1(Fall); November 1 (Spring); Deadline for Maymester and Summer sessions is two weeks prior to the first day of class. Additional documentation may be requested at any time during the application process. Application must be completed by the first day of class or application will be denied for that semester.