

# Application

## Ohio Student Residency for State Subsidy And Tuition Surcharge Purposes

*Return Completed Form To:*  
**BOWLING GREEN STATE UNIVERSITY**  
**Office of Registration and Records**  
**Room 110, Administration Building**  
**Bowling Green, OH 43403-0130**  
**(419) 372-8441 Phone (419) 372-7977 Fax**

Circle Section applying under:

C1 C2 C3 C4 C5  
E1 E2 E3 E4 E5 E6 E7 E8 F2

1. Name \_\_\_\_\_  
(First) (Middle) (Last)

2. Student ID# \_\_\_\_\_

3. Date of Birth \_\_\_\_\_

4. **Present Address** \_\_\_\_\_  
Number and Street Length of time at present address

\_\_\_\_\_  
City State County Zip Code

Phone Number: ( ) \_\_\_\_\_ Email address: \_\_\_\_\_

5. **Ohio Address** (if different from above) \_\_\_\_\_ Ohio County \_\_\_\_\_

6. For C5 applicants only: Ohio High School graduated from \_\_\_\_\_

7. Student Status: \_\_\_\_\_ Currently Enrolled Student \_\_\_\_\_ Undergrad \_\_\_\_\_ Grad  
\_\_\_\_\_ New Student \_\_\_\_\_ Former Student  
Application for: Fall 20\_\_\_\_  
Spring 20\_\_\_\_  
Summer 20\_\_\_\_

8. Marital Status: \_\_\_\_\_ Single \_\_\_\_\_ Married

9. Employment: Are you or your spouse employed in Ohio?

You: \_\_\_\_\_ No \_\_\_\_\_ Yes \_\_\_\_\_ Full-time \_\_\_\_\_ Part-time  
Spouse: \_\_\_\_\_ No \_\_\_\_\_ Yes \_\_\_\_\_ Full-time \_\_\_\_\_ Part-time

10. Please provide your employment history for the past 12 months (use separate sheet if necessary):

Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_

Dates of Employment \_\_\_\_\_

Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_

Dates of Employment \_\_\_\_\_

(over)

11. List your address(es) for the past 24 months:

\_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

\_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

\_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

\_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

12. Are you a citizen of the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If not, what type of Visa do you hold?  
 \_\_\_\_\_ Permanent Resident Alien - Date: \_\_\_\_\_ Number: \_\_\_\_\_  
 \_\_\_\_\_ Student (F1) Are your parents Ohio residents? YES/NO Is your spouse an Ohio resident? YES/NO  
 \_\_\_\_\_ Other: \_\_\_\_\_

13. In what state are you registered to vote? \_\_\_\_\_  
 When and where did you last vote? \_\_\_\_\_

14. Do you have an Ohio drivers license? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 (if yes, attach copy)  
 Do you own or have use of a car? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 Is the car currently registered in Ohio? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 Do you have a drivers license from any other state? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, which state? \_\_\_\_\_

15. Have you paid Ohio Income Tax (on wages)? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, for which year(s) \_\_\_\_\_

16. Who claimed you as an exemption on the past year's Federal Income Tax Return?  
 \_\_\_\_\_ Self \_\_\_\_\_ Other (if other, complete the following):  
 Name \_\_\_\_\_  
 Relationship \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_

Will this person claim you on next year's tax return? \_\_\_\_\_ Yes \_\_\_\_\_ No

I certify that the information contained in this application is complete, accurate and true. I agree that as a student I am subject to the Code of Student Conduct of Bowling Green State University.

\_\_\_\_\_  
 Applicant's Signature

\_\_\_\_\_  
 Date

17. Complete this page **ONLY** if you are applying under Section C2:

List all sources of income and expenditures for the 12 months preceding the semester of enrollment you are applying. If you list support in the parent, relatives/friends or gifts sections, list the contributor's state of legal residence and the length of time residing there. **Attach proof for all income listed (i.e. , loan & scholarship information from BGSU Financial Aid link on MyBGSU, paycheck stubs, W2 statements, etc.).**

	<u><b>INCOME</b></u>	<u><b>EXPENSES</b></u>
Employment	\$ _____	Fees \$ _____
Spouse's Employment	_____	Books _____
Savings	_____	Food _____
Scholarships	_____	Rent _____
Grants	_____	Utilities _____
Loans (State of _____)	_____	Clothing _____
VA Benefits	_____	Travel _____
Social Security	_____	Auto/Ins. _____
Parent/Guardian (State of _____)	_____	Other Ins. _____
Relatives/Friends (State of _____)	_____	Laundry _____
Gifts (State of _____)	_____	Recreation _____
Other	_____	Other _____
<b>TOTAL</b>	\$ _____	<b>TOTAL \$</b> _____

I certify that the information contained in this application is complete, accurate and true. I agree that as a student I am subject to the Code of Student Conduct of Bowling Green State University.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date