



## Verification of Residency

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Please Print) Last First M.I.

SRC ID# : \_\_\_\_\_ Semester: \_\_\_\_\_

**Must provide one of the following (check one):**

- In-District Drivers License (if not a licensed driver, a State Identification card)
- In-District Vehicle Registration Card
- In-District Voters Registration Card
- Property tax forms showing taxes paid to District 534
- Most current State of Illinois income tax form
- Concurrent full-time enrollment (12 hours or more) at Western Illinois University
- Other similar documentation providing verification of the student's address

Type of documentation provided \_\_\_\_\_

**Statement of Residency**

As a student at Spoon River College, I confirm that I have a verifiable interest in establishing permanent residency in the Spoon River College district.

Because of this, I am asking for a waiver of the 30-day residency requirement as specified in the Administrative Rules of the Illinois Community College Board, Section 1501.501 (Residency-General Provisions-July, 1999).

Signature \_\_\_\_\_ Date \_\_\_\_\_