University of Illinois at Springfield – Office of Financial Assistance
One University Plaza, MS UHB 1015 -- Springfield, Illinois 62704-5407 -- Phone: (217) 206-6724
https://www.uis.edu/financialaid/

2020-2021 Confirmation of Student Illinois Residency

For Priority Processing Submit Form by July 15, 2020

Section A – Student Information (Please print clearly)

Last Name | First Name | M.I. | Email

Street Address | City | State | Zip Code

What you should do:

1. Complete this entire worksheet. You must answer all the questions and the form must be SIGNED.
2. Please submit all documents at the same time to the address listed above or upload in self-service ***(please do not email/fax)***.
3. Clearly print UIN on every page of 8 ½ x 11 legible copies.

Section B – Student Illinois Residency Confirmation

According to your legal state of residence, please answer the following questions and attach the appropriate documentation.

My state of legal residence is Illinois: YES ☐ NO ☐ (If **No**, please indicate your state of legal residence: _____ and proceed to **Section C**).

Month and year you became a legal resident of Illinois: _____ / _____
Month Year

I have attached the following ***current*** documentation ***(please check and submit one only):***

Please note, a Temporary Visitor Driver's License (TVDL) is NOT an acceptable form of documentation.

- ☐ Illinois high school or Illinois college transcript;
- ☐ Valid Illinois driver's license, valid Illinois REAL ID Driver's License;
- ☐ Utility bill in the applicant's name - i.e. electric, gas, water, refuse, phone (land or cell), or cable/internet;
- ☐ Rent/mortgage bill in the applicant's name;
- ☐ Illinois auto registration card;
- ☐ Residential lease in the applicant's name;
- ☐ State of Illinois Identification Card issued by the Secretary of State;
- ☐ Illinois voter's registration card; or
- ☐ Property tax bill

Section C – Student Signature

IMPORTANT: Return this form to the Office of Financial Assistance. When submitting documentation:
1. **Clearly print UIN on every page of 8 ½ x 11 legible copies.**
2. **Include all appropriate signatures.**

I certify that the information provided on this form and any attachments are true and correct.

Student Signature **Date**

ENTER YOUR 9-DIGIT **UIN** →

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