

# Statement of Residency

Complete this form and bring to Business Office.



LEHIGH CARBON COMMUNITY COLLEGE  
4525 Education Park Drive  
Schnecksville, PA 18078-2598

FOR OFFICE USE ONLY

Entered in Banner:

Date \_\_\_\_\_

Initials \_\_\_\_\_

Semester: Fall  \_\_\_\_\_ Spring  \_\_\_\_\_ Summer  \_\_\_\_\_

Student Name \_\_\_\_\_ Social Security Number \_\_\_\_\_ Age \_\_\_\_\_

Street Address \_\_\_\_\_ Telephone Number \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ Lehigh  Carbon   
Northampton  Other  State \_\_\_\_\_ Zip \_\_\_\_\_

Date moved to this address: Month \_\_\_\_\_ Year \_\_\_\_\_

(If at this address less than one year, please show previous address below.)

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

How long at this address? \_\_\_\_\_

Each registrant is required to file a Statement of Residency for the purpose of determining school district jurisdiction. The information given is subject to verification, and falsification may result in additional fees and cost which if not paid will result in cancellation of registration.

Please check either Box 1, Box 2, or Box 3, and complete the necessary information.

1. Resident of Sponsoring School District: Please read the following list carefully and check the school district in which you reside.

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> (A) Allentown  | <input type="checkbox"/> (L) Lehigh              | <input type="checkbox"/> (P) Palmerton      | <input type="checkbox"/> (S) Salisbury        |
| <input type="checkbox"/> (C) Catasauqua | <input type="checkbox"/> (N) Northern Lehigh     | <input type="checkbox"/> (V) Panther Valley | <input type="checkbox"/> (U) Southern Lehigh  |
| <input type="checkbox"/> (E) East Penn  | <input type="checkbox"/> (R) Northwestern Lehigh | <input type="checkbox"/> (K) Parkland       | <input type="checkbox"/> (W) Whitehall-Coplay |
| <input type="checkbox"/> (T) Jim Thorpe |  |   |   |

2.  Resident of Nonsponsoring School District. If a Pennsylvania resident, list the County \_\_\_\_\_

3.  Nonresident of Pennsylvania / International Student

4.  Resident of Schuylkill County

5. I am a citizen of the United States.  Yes  No If no, please indicate Country of Citizenship \_\_\_\_\_

Type of VISA:

1. Visitor \_\_\_\_\_ 2. Student (F1) \_\_\_\_\_ 3. Permanent Resident: Alien Card No. \_\_\_\_\_

6. Do you have a driver's license?  Yes  No

If yes, give exact address on license \_\_\_\_\_  Check if same as above

**PLEASE SIGN THE FOLLOWING STATEMENT: This is to certify that the information stated above is true and correct.**

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

Upon review of the above data, I hereby declare the above named student  is  
 is not eligible for residence status in this school district.

Date

Secretary/Business Manager

Official Seal