2023–2024 Proof of Washington State Residency Form



Student	's First Name:	Student's Last Name:
Colleague ID:		Email:
SECTIO	ON A – CONDIT	TIONS
I have be	een a resident of th	e State of Washington continuously since:
In order	to receive this gran	t, you must certify that you will comply with the Conditions of Award on this form by signing below.
1.	I am a resident of	the State of Washington, in accordance with RCWB 15.012.(2)(a)-(e).
2.		roof that I have maintained a bona fide domicile in the state of Washington, for purposes other than educational, for the ar immediately prior to my first day of attendance at any WA State Institution of Higher Education.
		ICE OF WASHINGTON STATE RESIDENCY
Choose	your dependency	status:
	·	ndent Student, you must possess and present at least one (1) article listed below and a parent must possess and articles listed below.
	Financially Inde	ependent Student, you must possess and present at least two (2) articles from the list below.
		ow are acceptable forms of evidence of Washington State residency. All documents must be issued at least one year dent's first day at any WA State Institution of Higher Education.
	A Washington S	tate Issued Driver's license or ID card. (Copy of WDL/ WID must be attached.)
	Motor vehicle, m	notor home and/or travel trailer State of Washington registration. (Copy of vehicle registration must be attached).
	Documentation (of permanent full-time employment within the State of Washington. (Employee verification must be attached).
	Documentation sattached).	showing you are registered to vote in the State of Washington. (Copy of valid voter registration ID or registration form
		showing that you own, are purchasing, or are leasing/ renting your primary residence in the State of Washington. umentation must be attached).
	Documentation of must be attached	of a checking account, savings account and/or safety deposit box in the State of Washington. (Supporting documentation d).
		that supports the fact that you are a State of Washington resident. Supporting documentation must be attached and Office of Financial Aid. Please describe the type of documentation you are attaching:
	*When the term "	is used, it is meant to refer to the independent student or one or both of the parents or legal guardians of dependent students.
By signi	ng this workshee	
•		n reported is complete and accurate at this time. completing this form does not guarantee eligibility for Washington State Aid.
TYPED .	SIGNATURES ARI	E NOT ACCEPTABLE, please physically sign form.
Student	Signature:	Date: