



Shelton State Community College Enrollment Services

Fax 205.391.3910 ♦ Email admissions@sheltonstate.edu

This form may be emailed or faxed.

All applicants must complete this form. Residency guidelines are set by the Alabama Community College System.

Please read the following statements and check one statement that applies to you.

1. _____ I qualify as an in-state student, based on one of the following:
 - I support myself financially, and I (or my spouse) have lived in the state of Alabama for at least twelve months.
 - I am a dependent student, and my supporting person has lived in the state of Alabama for at least twelve months.
 - I graduated from an Alabama high school or obtained a GED in the state of Alabama within three years of this application.
 - I intend to remain at this address indefinitely.
2. _____ I am currently considered an out-of-state student. I **do not** meet the guidelines for Alabama resident tuition but am aware that I can reapply once I have met the guidelines. Requests for change of residency status can be made only during the drop/add period for that semester. **An out-of-state student cannot attain residency status by attending school for twelve months in the State of Alabama.**
3. _____ I have currently lived in the State of Alabama for less than twelve months. However, I certify that I have more substantial connections with the State of Alabama than with any other state.

If #3 is selected, you may be eligible for in-state residency if **ONE** of the following applies to you. You are required to provide documentation to the Enrollment Services Office for certification before the in-state tuition rate is official.

1. Payment of Alabama state income taxes as a resident
2. Ownership of a residence or rental property in the state
3. Full-time employment in the state (self, spouse, or supporting person)
4. Voter registration and voting in the state
5. Member of the United States military on full-time active duty stationed in Alabama (self, spouse, or supporting person)
6. Accredited member of a consular staff assigned to duties in Alabama
7. Residence in Lowndes County or Noxubee County in Mississippi

FOR ENROLLMENT SERVICES OFFICE USE ONLY:

According to State Board Policy 801.01: Admission: All students must provide one primary form of documentation or admission to Alabama Community Colleges. All international students must provide an acceptable VISA. Applicant has provided the following:

- One Primary Form of Documentation Type: _____
- Acceptable VISA

Signed _____ Date: _____
Enrollment Services Office Representative

Upon enrolling at Shelton State, I assume an obligation to conduct my academic affairs in a manner compatible with the standards of academic honesty established by the College. If I neglect or ignore this obligation, I understand disciplinary action will be taken. Students are expected to abide by the *Standard College Policies, Schedule of Classes, and SSCC College Catalog/Student Handbook* while attending Shelton State.

I understand I will not be able to register for classes for the second semester of attendance until ALL admissions documents are on file. I certify the statements on this application are true and complete to the best of my knowledge. I understand falsification of information could result in dismissal or disciplinary action. I understand that if I fail to honor my obligation for payment, including penalties and fines, Shelton State Community College will use legal means to collect the amount due. I understand all applicable refund and withdrawal policies are explained in the catalog, schedule, and College website.

I Understand that Shelton State Community College owns all photographs taken at College events, and that the College reserves the right to use images of students and participants for promotional materials, both digital and print. If I do not wish to have my image used, I understand that I must request special consideration from the Office of Media and Communication.

By signing below, I certify acknowledgement and compliance with all statements listed above and all College policies, consent to phone calls and electronic communication from Shelton State Community College, and understand email is the primary form of communication for the College.

To opt out of phone calls, email Enrollment Services at help@sheltonstate.edu.

Printed Full Name _____

Signature of Student _____ Date _____

A# (User ID) _____