## **Residency Status Change Form**

Please refer to the residency policy located in the Admissions section of the College Catalog – Appendix I located at https://catalog.csmd.edu.

All applicable areas of the form must be filled out completely, do not leave any areas blank.

Please PRINT clearly.

Semester/year of petition:	S	Student ID #	
Student Name:Last Name			
Last Name	First Name		
Contact Phone: (Day)	Email Address:		
Mailing Address:			
	Street		
City		State	Zip
Registered for upcoming semester	Yes No	)	
Active Duty/Retired Military	Yes No	)	
Dependent of Active Duty/Retired Milita	ry Yes No	)	
Two Proofs of Residency Documents A	ttached: (Two (2) different address, dated three (3) m		
Military Orders	Current Lease or Deed of Residence		
Maryland Driver's License	Prior Year's Income Tax Returns		
Maryland Vehicle Registration			
Voter's Registration			
** The Admissions Department will e Residency Status Change Form. Pleas			
Signature:		Date:	

College of Southern Maryland Attn: Admissions P.O. Box 910 La Plata, MD 20646 askme@csmd.edu