

REQUEST FOR CERTIFICATION OF TENNESSEE RESIDENCY TO PARTICIPATE IN THE TENNESSEE HIGHER EDUCATION COMMISSION PROGRAMS

Please complete this application and mail or bring to: Meharry Medical College, Office of Financial Aid and Scholarship Management, 1005 Dr. D. B. Todd Jr. Blvd, LRC Building, Suite 609, Nashville, TN 37208-3599

****YOU MUST ATTACH ALL REQUESTED INFORMATION OR APPLICATION WILL NOT BE ACCEPTED****


Institution: MEHARRY MEDICAL COLLEGE
Type of Academic Program: _____MEDICINE _____DENTISTRY
Program Type: _____THEC State Grant
Term of Initial Entry Into Program: _____Fall _____Spring
Year of Initial Entry Into Program: _____

Name: _____
Last First MI

Address: _____
Number and Street City State Zip

Telephone Number: _____ **SSN:** _____ **M#:** _____

Driver's License: _____
State Driver's License Number

 **Please attach a photocopy of both sides of your Driver's License to this application.**

Domicile:

“Domicile” shall mean a person’s true, fixed and permanent home and place of habitation; it is the place where he/she intends to remain and to which he/she expects to return when he/she leaves without intending to establish a new domicile elsewhere.

Have you resided in Tennessee continuously since birth? _____Yes _____No

If **NO**, what the most recent date that you began to reside continuously in Tennessee to the present date?

Month Day Year

Address at time you began your most recent domicile: _____
Street City State Zip

If you have not lived in Tennessee continuously since birth, why did you move to Tennessee?

Did you move to Tennessee in anticipation of attending school here? _____Yes _____No

Is Tennessee your current domicile? _____Yes _____No

EDUCATION:**High Schools Attended:**

Name of School	City and State	Dates Attended

Colleges /Universities Attended:

Name of School	City and State	Dates Attended

Past 12 Months History:

During the past twelve months prior to the date of this application, list your place(s) of residence and primary activity (e.g. school attended, place of work, etc.) If more space is needed, attach a separate sheet of paper to this application.

Month	Residence	Major Activity

Have you ever been classified as an in-state resident by a state-supported higher educational institution in Tennessee? Yes No

If YES, give details:

CITIZENSHIP:

Are you a citizen of the United States? Yes No

If NO, what is your status in this country (e.g. type of visa)?


Are you registered to vote? Yes No

If YES, in what State are you registered to vote? _____

Attach a photocopy of voter's registration card

Have you filed state or federal income tax form for the previous year? Yes No

If YES, what address was given as residence?

 **Attach photocopy of address section of tax form**

FINANCIAL SUPPORT:

Are you presently employed? _____ Yes _____ No If **YES**, give employer's address:

Street City State Zip

Dates of employment by above employer: _____

Number of hours worked per week for employer: _____

List other sources from which you received more than approximately 10% of your financial support or income during the past twelve months.

MARITAL STATUS (OPTIONAL):

If married, has spouse been domiciled in Tennessee continuously since birth? _____ Yes _____ No

If **NO**, when did spouse begin his/her most recent domicile in Tennessee? _____

For what reason did spouse come to Tennessee to establish the most recent domicile?

Is spouse employed full-time in Tennessee? _____ Yes _____ No

How long has spouse been in present position? _____

PARENTAL INFORMATION:

(Complete this section **ONLY** if one or both parents claim you as a dependent on Federal Tax return)

Father's Name: _____

Father's Address: _____

Mother's Name: _____

Mother's Address: _____

If your parent(s) or guardian is not presently domiciled in Tennessee, has he/she previously been domiciled in Tennessee? _____ Yes _____ No If **YES**, give previous address.

Street City State Zip

Dates of previous domicile: _____

Did either parent or guardian claim you as a dependent on most recent income tax return? _____ Yes _____ No

OTHER INFORMATION:

Are you currently in active military service? _____ Yes _____ No

If **YES**, from what state did you enter the military service? _____

Do you own an automobile? _____ Yes _____ No

If **YES**, in what state is your automobile registered? _____

 **Attach photocopy of automobile registration**

Do you own the dwelling in which you live? _____ Yes _____ No

If YES, date of purchase? _____

Have you been classified for tuition or fee purposes as an in-state resident of any other state?
_____ Yes _____ No

If YES, please give details: _____

Provide any further information which you wish to offer in support of your application on a separate sheet of paper.

APPLICANT SIGNATURE:

I, _____, swear or affirm under penalty of perjury under the laws of the state of Tennessee that the above information is true and complete and that: (check one)

_____ I am a United States citizen, or

_____ I am an alien lawfully present in the United States

I understand that this statement is required by Tennessee law because I have applied for a public benefit. I understand Tennessee law requires me to provide documentation verifying the status indicated above prior to receipt of this public benefit. I understand that knowingly and willfully making a false, fictitious, or fraudulent statement or representation shall subject me to liability under the Tennessee False Claims Act, Tennessee Code Annotated § 4-18-101 et seq. I understand that if I am found to have made a false or misleading statement, my admission may be rescinded and I may have to make restitution for the financial aid I have received from the State of Tennessee.

Applicant's Signature

Date

PLEASE DO NOT WRITE BELOW THIS LINE.

Eligibility Determination: _____ U.S. Citizen _____ Tennessee Resident _____ Not Eligible

Certification Official: _____
Name Date

Please Note: The State of Tennessee requires that state-sponsored aid be **frontloaded** to a student's financial aid award. As a result, the actual disbursement of funds may be delayed, and students may not receive their full refund until the College receives payment from the State. Applicants are encouraged to make an informed decision before applying for this grant.

Please be advised that institutional funds are not available to advance or cover anticipated refunds.