

Enrollment Services  
Phone: (541) 463-3100  
Fax: (541) 463-3995  
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## REQUEST FOR RESIDENCY CHANGE

YEAR \_\_\_\_\_ \*TERM: Summer Fall Winter Spring  
*(Circle One)*

NAME of  
STUDENT: \_\_\_\_\_

L# \_\_\_\_\_

LOCAL ADDRESS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Residency Requested:  In-state  Out of state  International(N)  
 IESL (F1)  International Special Visa

**Proof of 90-day residency is required. Please attach one of the following acceptable documents to verify your residency:**

- Oregon driver's license  Utility bill  Active savings or checking account
- Employee payroll record  DD214  Social agency record
- Lane County (or other in-district) tax report.

**\*Please note: Residency requests can only be made for future terms. Once the term is in progress, or over, residency status and rates can not be changed.**

STUDENT  
SIGNATURE: \_\_\_\_\_