

Enrollment and Student
Financial Services
Phone: (541) 463-3100
Fax: (541) 463-3995
Email: studentrecords@lanecc.edu



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 are not retroactive to previous terms. Once the term is over, residency status and rates can not be changed.**

STUDENT
SIGNATURE: _____