

**REQUEST FOR TENNESSEE RESIDENCY CERTIFICATION  
BY THE TENNESSEE HIGHER EDUCATION COMMISSION**

Please complete this application and mail it to:

John A. Gupton College, 1616 Church Street, Nashville, TN 37203 Attn: Financial Aid Department

Institution: John A. Gupton College

Name of Academic Program: Funeral Service

Degree: Associate of Science

Term of Initial Entry Into Program: Spring \_\_\_\_\_ Summer \_\_\_\_\_ Fall \_\_\_\_\_

Year of Initial Entry Into Program: \_\_\_\_\_

Name: (Please print)

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Name

Current Address (Please print)

\_\_\_\_\_  
Number and Street name

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

Current Telephone Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

\_\_\_\_\_  
Area Code and Number

Driver's License Number:

\_\_\_\_\_  
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 or 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 was the most recent date that you began to reside continuously in Tennessee to the present date?

\_\_\_\_\_  
Month and Day

\_\_\_\_\_  
Year

Address at time you began your most recent domicile:

\_\_\_\_\_  
Street and Number

\_\_\_\_\_  
City, State

\_\_\_\_\_  
Zip Code

If you have not lived continuously in Tennessee 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 Institution	City and State	Dates Attended

**Past 12 months history:**

During the past 12 months prior to the date of this application, list your places(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, please give details below:

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**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)?

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Are you a registered to vote? \_\_\_\_\_ Yes \_\_\_\_\_ No

If YES, in what state are you registered to vote? \_\_\_\_\_



**Attach a photocopy of your voter registration card**



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

If YES, what address was given as residence?

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**Attach a photocopy of your address section of the tax form**



**FINANCIAL SUPPORT:**

Are you employed: \_\_\_\_\_ Yes \_\_\_\_\_ No If YES, give employer's address.

Street and Number \_\_\_\_\_ City, State \_\_\_\_\_ Zip Code \_\_\_\_\_

Date 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.

\_\_\_\_\_

**MARTIAL STATUS:**

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 TN? \_\_\_\_\_

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

\_\_\_\_\_

Is spouse employed full-time in TN? \_\_\_\_\_ 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 and Number \_\_\_\_\_ City, State \_\_\_\_\_ Zip Code \_\_\_\_\_

Dates of previous domicile: \_\_\_\_\_

Did either parent or guardian claim you as a dependent on his/her 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? \_\_\_\_\_



**Please attach a 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/fee purposes as an in-state resident of any other state?

Yes  No

If YES, please give details.

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

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**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 State citizen; or

I am lawfully present in the United States

I understand 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.

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**Applicant Signature**

**Date**

Note to applicants regarding benefits under the terms of the Contract: Inaccurate representations can be cause for withdrawal of benefits and other penalties.

Please do not write below this line

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Residence Determination:  Tennessee Resident  Non-Resident

Certification Officer: \_\_\_\_\_

Name

Date

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