|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Social security number (SSN) or have it in an accessible and secure location: | | | | | |  | |
| Birthdate (mm/dd/yy): |  | | | | | | |
| Place of birth (city, county, state): | | |  | | | | |
| Did your parents attend and/or graduate from college? | | | |  | | | |
| If yes, where did they attend and in what year did they graduate? | | | | | | | |
| Parent 1: College Attended | |  | | | Year of Graduation: | |  |
| Parent 2: College Attended | |  | | | Year of Graduation: | |  |

*Are you ready for College Application Day on Nov. 7th?*

**If you are applying to a Montana public university and wish to pay in-state tuition, you will need to establish that you are a resident of Montana. You will be required to provide the following information for you and at least one parent or guardian.**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Does your parent or legal guardian claim you as a federal income tax exemption? | | | | | | | | | | | | | | | | | | Yes No |
| If yes, you will need the following information about your parent/guardian: | | | | | | | | | | | | | | | | | | |
| Date he/she began living in Montana (mm/dd/yy): | | | | | | | |  | | | | | | | | | | |
| Date of extended absences from Montana (mm/dd/yy): | | | | | | | | | | | |  | | | | to |  | |
| Reason for absence: | |  | | | | | | | | | | | | | | | | |
| Has he/she filed a Montana state income tax return? | | | | | | | | | | Yes No | | | | | | | | |
| As a part-year resident | | | | | | | As a full-year resident | | | | | | | | | | | |
| List the last three years Montana income taxes have been filed: | | | | | | | | | | | | | |  | | | | |
| Date of his/her Montana voter registration (mm/dd/yy): | | | | | | | | | | | | |  | | | | | |
| Does he/she have a current Montana driver’s license? | | | | | | | | | | | Yes No | | | | | | | |
| Current issue date (mm/dd/yy): | | | | |  | | | | Is this a renewal? Yes No | | | | | | | | | |
| Date of his/her current Montana vehicle registration (mm/dd/yy): | | | | | | | | | | | | | | |  | | | |
| What is his/her employment status? (check all that apply) | | | | | | | | | | | | | | | | | | |
| Full-time | Part-time | | Retired | | | | Unemployed | | | | | | | Seasonal | | | Permanent | |
| Name and address of employer: | | | | | |  | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | |
| Date of start of employment: | | | |  | | | | | | | | | | | | | | |