

CHICAGO STATE UNIVERSITY

Office of Student Financial Aid | 9501 S. King Dr., ADM 207 | Chicago, IL 60628-1598 | Ph: 773.995.2304 | Fax: 773.995.3574 | E-mail: csu-finaid@csu.edu

2026-2027 VERIFICATION OF STUDENT ILLINOIS RESIDENCY

The Illinois Student Assistance Commission (ISAC) requires that for an **independent** student to be considered a resident of Illinois s/he must have: **physically resided in Illinois (at the time of application), and has so resided for 12 continuous full months immediately prior to the start of the academic year for which assistance is requested and Illinois must be his/her true, fixed, and permanent home.** Students who are in a graduate or post-baccalaureate program are not eligible for MAP.

STUDENT INFORMATION (PLEASE PRINT CLEARLY):

Student Last Name First Name M.I. CSU Identification Number

Street Address City State Zip Code

My state of legal residence is Illinois: ☐ Yes ☐ No (If no, please indicate your state of legal residence here _____ and skip the Illinois Residency Documentation section. Sign and date this form and submit to the Office of Student Financial Aid.)

Student Illinois Residency Confirmation: Independent students are required to submit documentation certifying they have been a resident of Illinois prior to **August 25, 2025.**

Please indicate the month and year you began residing in Illinois _____ / _____
Month Year

ILLINOIS RESIDENCY DOCUMENTATION

PLEASE COMPLETE THIS FORM IN ITS ENTIRETY. INCLUDE STUDENT'S NAME AND CSU ID NUMBER ON ALL ATTACHED DOCUMENTS.

You may drop off, mail, fax or scan and e-mail required documentation. Our address, fax number and e-mail address are listed at the top of this form.

Submit only *one* item, listed below, to verify Illinois residency. Please check the box identifying the documentation you are attaching to verify Illinois residency:

☐ IL Driver's License	☐ 2025 W2 forms
☐ IL State Identification Card	☐ 2025 Federal 1040 (not IRS Tax Return Transcript)
☐ IL Auto Registration Card	☐ IL Property Tax Bill
☐ IL Voter Registration Card	☐ IL Department of Employment Security: Statement of Benefits
☐ IL Public Aid: Statement of Benefits	☐ Other (subject to approval/acceptance by the Financial Aid Office)
☐ Utility Bill or Lease in the applicant's name	

Student Signature: I certify that the information provided on this form, and any attachments, is true and correct.

Student Signature

Date