SOUTHERN ILLINOIS UNIVERSITY **EDWARDSVILLE**

Student Financial Aid

2308 Rendleman Hall Campus Box 1060 Edwardsville, IL 62026-1060 Phone: (618) 650-3880 Fax: (618) 650-3885

Email: finaid@siue.edu Homepage: www.siue.edu/financial-aid

2025-2026

Proof of Illinois Residency -Independent

ILRSI

Studen	t NameUniv. ID#
Permar	nent AddressCity
State _	Zip CodePhone
Steps t	to complete:
1. 2. 3.	Complete this entire worksheet. This form must have the required signature at the bottom Please submit all documents at the same time with this form Clearly print your University ID on every page
<u>Studer</u>	nt Illinois Residency Confirmation
	attached one of the following documents to verify that I have resided in Illinois for 12 consecutive full months immediately the start of the academic year, 08/18/2024-08/18/2025.
	2024 Signed Illinois Tax Return; Valid Illinois driver's license, or valid Illinois REAL ID driver's license, issued before 8/18/2024; Valid Illinois Identification Card, issued by the, Secretary of State, issued before 8/18/2024; 2023 & 2024 W-2 Forms; 2023 & 2024 Illinois Property tax bill;
* If the options	above preferred documents are not available, please reach out to the Office of Student Financial Aid to discuss other possibles.
	I cannot provide proof of Illinois residency prior to 8/18/2024.
_	sle: An independent student attending an institution with an academic year starting on August 18, 2025, must have resided in a from August 18, 2024, through August 18, 2025, and must provide documentation proving Illinois residency for that entire time period in order to be considered for a grant.
	For additional information about the Monetary Award Program eligibility, please visit: www.isac.org
Vith my	inked signature, I certify that ALL the information on this form is true and complete.
Required	Student Signature Date
	If typed/electronic signature is submitted, this form will be considered incomplete and financial aid will be delayed.

FORMS/ILRSI2526 03/2025