

University of Georgia Request for Classification from Out-of-Country to Out-of-State

Section One – Student Information

Name _____ ID# _____
last first middle initial

Permanent Address _____
street address city state zip

E-mail address _____ Telephone # (_____) _____
Please provide best email and telephone number for notification and contact purposes

Section Two – Effective Beginning Semester (choose one)

Note: Requests will not be considered for previous terms.

Fall (August) Spring (January) Summer (choose session): May E Thru SS1 SS2

Section Three – High School Information

High School Name _____

High School Address _____

Date of High School Graduation _____

Section Four – Student’s Oath and Affirmation

I understand that any material false statement made knowingly and willingly by me on this application, or any documents attached hereto may, in accordance with O.C.G.A. 16-10-71, which provides that upon conviction, a person who knowingly commits the offense of false swearing shall be punished by a fine of not more than \$1,000 or by imprisonment for not less than one nor more than five years, or both, subject me to prosecution in a court of law. Additionally, I further understand that any such false statement may subject me to immediate dismissal from the institution.

Further, I certify that, to the best of my knowledge, the information submitted on this petition is true and complete.

Student’s Signature _____ Date _____

rev 17 Jul 2024

All social security numbers must be redacted on all documentation prior to submission. Please return this completed form and required documentation to:
Residency and Tuition Classification Center / Office of the Registrar / The University of Georgia
Holmes/Hunter Academic Building / Athens, Georgia 30602-6113; Fax: (706) 583-0319
Submission Deadline: Fall - August 1, Spring - December 1, Summer - May 1