Checklist for Independent Student Applicants

"Independent Person" is defined as one who is in his/her majority (eighteen years of age or older) or an emancipated minor, whose predominant source of income is his/her own earnings or income from employment, investments, or payments from trusts, grants, scholarships, commercial loans, or payments made in accordance with court order. An independent person must provide more than half of his or her support during the twelve months immediately prior to the date that classes being for the semester for which resident status is requested. An independent person cannot claim the domicile of another individual as their own for the purposes of establishing intent to become a South Carolina resident. An independent person must have established his/her own domicile for at least twelve months prior to receiving in-state tuition and fees. An independent person cannot be claimed as a dependent or exemption on the federal tax return of his or her parent, spouse, or guardian for the year in which resident status is requested.

**This checklist is meant to be a general guide. We reserve the right to ask for more documentation if necessary**

**Independent South Carolina Resident**

☐ Completed and signed Application for Classification as a South Carolina Resident

☐ Completed Affidavit of Financial Independence

☐ Copy of South Carolina driver’s license

☐ Copy of South Carolina vehicle registration card(s) for all vehicles

☐ Proof of permanent, primary domicile in South Carolina – Acceptable proof includes: deed, commercial lease or settlement statement. Private lease agreements will only be accepted when accompanied by verifiable proof of payment (i.e., cancelled checks, money orders, etc.) Cash receipts and notarized statements are not acceptable.

☐ Copy of independently filed federal and state tax return transcripts

☐ Verifiable proof of income – most recent paystub with YTD earnings and W-2’s from all employers from the previous twelve months

☐ Notarized Certificate of Independence

**ALL documents should 12 months prior to the start of the term in which you are requesting South Carolina residency status for tuition and fee purposes, unless you qualify for one of the exceptions below**

**Exceptions**

☐ Full-time employment. Please attach a letter on letterhead that states (a) the effective date of your employment in South Carolina, (b) that employment is on a full-time basis, (c) the number of hours worked per week (please provide your most recent paystub showing hours worked) and (d) your eligibility for full-time benefits. Persons who are self-employed must provide a notarized statement certifying the above information, and attach a photo copy of their business license. You must plan on keeping a full-time job until your SC driver’s license turns a year old.

☐ Retirement. If you’re an independent student applying as a senior citizen or a retired person, you must show proof you’re receiving a retirement pension/annuity that’s taxable in SC.
Certificate of Independence
(MUST be completed entirely or will be rejected)

We/I ________________________________ of ________________________________,
(Parent(s)/Legal Guardian) ________________________________,
(Student Name) declare under oath this ______ of ______, 20____ that we reside at
(CWID) ________________________________,
(Day) (Month) (Year) in ________________________________,
(Street Address) (State) (County)

We/I will NOT claim ________________________________ as a dependent or exemption on our/my 20____ federal
(Student Name) income tax returns and provide a copy of the return transcripts no later than May 1 of the applicable tax year.

Signature ___________________________________________ Date ____________________________

Signature ___________________________________________ Date ____________________________

__________________________________________________________
Notary Public Stamp and Seal

Sworn before me this ______ day of _________________, 20____

Signature ____________________________________________

Notary Public for the State of ______________________________

My Commission Expires ________________________________