TO BE COMPLETED BY ALL STUDENTS
Snead State Community College • Office of Student Services
P.O. Box 734, Boaz, AL 35957
Phone (256)593-5120 • Fax (256)593-7180

STUDENT NAME: _________________________ SSN: _______________________

FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT – BUCKLEY AMENDMENT
NOTICE: Under the Federal Family Educational Rights and Privacy Act (FERPA), Snead State Community College may disclose certain student information as “directory information.” Directory information includes names, addresses, telephone numbers, email addresses, dates of birth, program majors, information about participation in officially recognized activities and sports, weight and height of members of athletic teams, dates of attendance, grade level, enrollment status, degrees and awards received, photos, and honors. If any student does not want directory information to be released, he/she must notify, in writing, the Director of Admissions and Records.

ALABAMA COMMUNITY COLLEGE SYSTEM STATEMENT OF RESIDENCY (must check at least one)

1. ____ I qualify as an In-State resident. I, or my non-estranged spouse, or my parent/legal guardian (if minor dependent student) have lived in Alabama for the last 12 months and/or I graduated from an Alabama high school or received a GED in the state of Alabama within three years of my application date.

2. ____ I understand that I am classified as an out-of-state student and will be charged out-of-state rates. An out-of-state student cannot attain resident student status simply by attending school for 12 months in the State of Alabama.

3. ____ I qualify for In-State tuition rates because I am a military veteran or a student who is receiving Veteran’s Benefits to attend Snead State Community College.

4. ____ I qualify for In-State tuition rates because I reside in one of the following counties in Georgia (circle one): Chattooga, Floyd, Polk, or Walker.

5. ____ I have currently lived in the State of Alabama for less than 12 months but can certify that I possess “more substantial connections” with the State of Alabama than any other state.

If item #5 is selected, you are required to provide documentation of at least one of the following to the Admissions Office for certification before the in-state tuition rate is official. Other special circumstances will be considered on an individual basis.

1. Payment of Alabama State income taxes as a resident.
2. Ownership of a residence or other real property in the state and payment of ad valorem taxes.
3. Full-time, permanent employment in the state (self, spouse, or supporting person).
4. In-state address (street address, not P.O. Box) shown on driver’s license, automobile title registration, checking or savings accounts, hunting and fishing licenses, insurance policies, stock and bond registrations, last will and testament, annuities, or retirement plan investment accounts.

By signing below, I certify that all information provided is accurate, and I voluntarily consent to receive information in electronic transactions.

____________________  ______________________  ______________________
(Signature of Student)  (Date)

Residency status must be determined upon admission.
This form must be received in the Office of Student Services as part of the application for admission.

It is the official policy of the Alabama Department of Postsecondary Education including all postsecondary institutions under the control of the Board, that no person shall, on the grounds of race, color, disability, sex, religion, creed, national origin, or age, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program, activity, or employment.

Revised 01/2015