2020–2021 Illinois Residency Verification

The Illinois General Assembly has mandated (23 Illinois Administrative Code) that students (or their parents) must provide documentation of their Illinois residency in order to be eligible for the State of Illinois Monetary Award Program (MAP) Grant. State of Residency does not affect tuition charges at Loyola University Chicago or federal financial aid. We need to verify your state of residency to determine your eligibility for the MAP Grant. Any of the following documents may be used to prove Illinois residency. However, more than one may be necessary to document Illinois residency.

Dependent student: The custodial parent(s) of a dependent student must reside in Illinois on the date the Free Application for Federal Student Aid (FAFSA) was completed in order to be considered an Illinois resident. For example, if the FAFSA was filed on February 17, 2020, you must provide documentation that shows your parent was an Illinois resident on or before that date.

- Parent’s Illinois or federal income tax return with an Illinois address
- Illinois high school or college transcript for student
- Parent’s Illinois driver’s license
- Parent’s utility bills
- Parent’s rental lease

Independent student: An independent student must have resided in Illinois for a minimum of 12 consecutive months immediately prior to the first day of school in order to be considered an Illinois resident. To be an Illinois resident for the 2020–2021 school year, a student must document 12 continuous months of Illinois residency prior to August 23, 2020. Documentation must be provided with one or more of the documents listed below.

- 12 months’ utility bills
- Residential lease(s) covering 12 month period
- 12 months’ wage and tax statements (IRS form W-2)
- 12 months’ statement of benefits history from the Illinois Department of Public Aid
- 12 months’ statement of benefits from the Illinois Department of Employment Security

Note for independent students: The above types of documentation may be combined to equal 12 months of items, for example nine months’ paychecks and three months’ Public Aid statements.

Certification Statement:
All of the information provided by me or any other person on this form is accurate and complete to the best of my knowledge. If requested, we agree to give proof of the information we have provided on this form. Failure to provide the requested information will result in the loss of financial aid eligibility.

Student Signature __________________________________________ Date __________

Parent Signature __________________________________________ Date __________