



NORTH COUNTRY COMMUNITY COLLEGE

SPONSORED BY FRANKLIN AND ESSEX COUNTIES

Under the Program of the State University of New York
23 Santanoni Ave., P.O. Box 89, Saranac Lake, NY 12983-0089

FRANKLIN & ESSEX COUNTY RESIDENCY VERIFICATION FORM

Student Full Legal Name: _____ Last Four of SS: _____

PHYSICAL ADDRESS (PO Box not accepted)	DATE FROM	DATE TO
Current:	____/____/____	____/____/____
Prior:	____/____/____	____/____/____
Prior:	____/____/____	____/____/____

Select One: Franklin County Essex County

Documentation of one year's legal residence in NYS and 6 month residence in the above counties must have a physical address and an issue date clearly showing the date requirement.

The following are considered acceptable Documentation to verify residency (select one):

- NYS Driver's License
- NYS Identification Card
- NYS Voter Registration
- NYS Motor Vehicle Registration
- Other NYS issued Identification _____

If you do not have access to the Documentation on the left, the following are accepted:

- NYS Income tax return
- Residential Lease Agreement
- Proof of ownership of NYS and Franklin and/or Essex County Property
- Employment Paystub

Document Issue Date: _____

Mail forms and Copies of Documentation to:

NCCC Business Office
PO Box 89
23 Santanoni Avenue
Saranac Lake, NY 12983

STUDENT AFFIRMATION: I, the undersigned, in signing this document swear that my legal residence now is, and has for a period of **at least one year prior** to the date listed above been a resident of the state of New York. I affirm I have for a period of **at least six months prior** to the above date have lived in the above listed County. I swear all documentation provided are true and unaltered. I understand that further proof of residency may be required upon review.

Student Signature: _____

Date: _____

DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY

Document (s) Verified By: _____

Date: _____

Notes: _____