	Kansas State Univ VERIFICATION FOR KANSAS R DEPENDENT OF DIVORCED/SE		
1.	I will begin attending K-State (check one):		
	□ Fall Semester 20 □ Spring Semester	er 20	Summer Semester 20
2.			
	Student's Last Name, First, MI		WID (Wildcat ID) #
3.	Date of parent's divorce/separation		
4.	Name and address of parent not living in Kansas:		
	Full Name		
	Street Number or Rural Route (PO Box only is not sufficient)	Hom	e Phone/Cell Phone
	City State Zip Code	 Work	Phone
5.	Name and address of parent whose primary, per	rmanent	resident is in Kansas:
	Full Name		
	Street Number or Rural Route (PO Box only is not sufficient)	Home	e Phone/Cell Phone
	City State Zip Code		Phone
6.	Date continuous physical residence in Kansas be	egan:	
	Is parent in Kansas for a military assignment? □ Yes □ No ATTACH A COPY OF PARENT'S MOST RECENT KANAS TAX RET	URN (K40)	
	Kansas parent's signature		Date
7.	Are you a military dependent? 🗌 Yes 🗌 No		
8.	Are you a CITIZEN of the United States? Yes If NO, have you been granted Immigrant or Permanent Reside Service? Yes No	ent Status b	· -
	If NO, indicate type of VISA	If YES, attac	h a copy of your Alien Registration Card.
Univers	stand that falsified information can result in financial obligatio ity and that making a false writing is a felony under Kansas Lav ation from my application for admission and other university re tion.	w (K.S.A. 21	-5824). I also understand that
Date	Student Signature	·	

Return to: Admissions Office 919 Mid-Campus Dr N 119 Anderson Hall Manhattan, KS 66506