

## OFFICE OF ADMISSIONS AND REGISTRATION FLORIDA RESIDENCY CORRECTION FORM

Date:				
Empl ID#:				
Student Name:	Last	First	Middl	e
Term: Fa	all	Spring	Summer	
Florida Residen	cy Declaration and	l supporting docume	ntation are available o	on Image Now
Reason for Corre	ection/ Addition:			

## FOR OFFICE USE ONLY

Received by:	Date:
Processed by:	Date:

• Gov/state picture ID will be required



A&R Form – Rev 6/18 A&R Form Revised 3/2020