NORTH CAROLINA STATE UNIVERSITY PARENT'S AFFIDAVIT

The completed, signed and notarized affidavit must be received by the Residency Office. An electronic copy with an ink notary stamp is acceptable.

Date:	20	_			
Name of Applicant				Age	
Address of Applicant	(Last)	(First)	(Middle)		
Information below to be	completed by paren	t or guardian.			
Name of Applicant's Pa	rent or Guardian				
(Last) Address		(First)	(N	/liddle)	
Amount of financial sup months [amount or perc		and board) provided by pard \$ or	ents or guardian to t %	the applicant during the	last twelve (12)
Amount of financial sup (12) months \$	port (including room a or	and board) to be provided b %	by parents or guardia	an to the applicant durin	g the next twelve
Did either parent claim t	he applicant as an ex	cemption for federal income	e tax purposes on his	s or her last return?	Yes No
Does either parent inter Yes No	nd to claim the applica	ant as an exemption for fed	eral income tax purp	poses during the current	calendar year?
Did either parent claim t	he applicant as an ex	cemption for state income to	ax purposes on his o	or her last state return?	Yes No
Does either parent inter Yes No	nd to claim the applica	ant as an exemption for stat	te income tax purpo	ses during the current c	alendar year?
Did the applicant reside s/he reside in your home		any part of the preceding c ne pay room and/or board o		Yes No If Yes, h No Amount \$	ow many months did
Will the applicant reside s/he reside in your home		any part of the current cale Will s/he pay room and/o			many months will mount \$
		at the above applicant is ap C and that all of the informa			
Signature of Parent or C	Guardian Date				
Explanatory comments	may be made on the	reverse side of this sheet.			
Subscribed and sworn (or affirmed) before m	e this day	y of	, 2	_
at	۸		(State)	·	
(City	y)		(State)		
(Official Seal)			(Notary Pub	lic)	