



Office of Records and Registration  
P.O. Box 8, Wye Mills, Maryland 21679  
410-822-5400, 410-758-1537, or 410-228-6340, ext 247  
Fax: 410-827-5852  
[www.chesapeake.edu](http://www.chesapeake.edu)

## SUBSTANTIALLY UNINTERRUPTED PHYSICAL PRESENCE

Name: \_\_\_\_\_ Student ID or SSN: \_\_\_\_\_  
*(Print full legal name)*

I, \_\_\_\_\_, hereby affirm that I have substantially uninterrupted physical presence, including the months when I am not in attendance at Chesapeake College, at the address listed below.

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*(Address of substantially uninterrupted physical presence: Street, City, State, ZIP & County)*

I am requesting that my Chesapeake College tuition and fees be calculated based upon this address, and I affirm I will have been at this address for at least three months prior to the start of classes and intend to remain there for an indefinite period of time. I will notify the Office of Registration of any change of address that would change my residency status for purposes of tuition and fees.

Effective semester and year: \_\_\_\_\_

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***Student's signature***

***Date***

**Please note:** Documentation of ownership or rental (copy of current, 12-month lease required) of local living quarters must be provided along with this form in order to qualify for in-county residency status.

### Print this form and return to:

Chesapeake College Office of Registration, P.O. Box 8, Wye Mills, MD 21679

With few exceptions, state law gives you the right to request, receive, review and correct information about yourself collected on this form.

Office use ONLY

Date Received \_\_\_\_\_ Processed by \_\_\_\_\_  
7/18/16