

HARRISBURG AREA COMMUNITY COLLEGE
300 Cameron Street Road
Harrisburg, PA 17110

School Code No.

CERTIFICATE OF RESIDENCE FOR ATTENDANCE AT
HARRISBURG AREA COMMUNITY COLLEGE

Fiscal Year _____

Name _____ Social Security No. _____
 Last First Middle

Address _____ Telephone No. _____
 No. Street City State Zip

Municipality/Township/Borough _____

The person named above is recognized as a resident of _____
School District as of _____. The school district which had the
student (parent if under age 18) on the tax roll as of July 1 will be responsible for the district's
share of tuition for his/her attendance at Harrisburg Area Community College during the fiscal
year noted above.

District Official Signature

Date of Application