

**ALBANY COUNTY
AFFIDAVIT (OR AFFIRMATION) AND APPLICATION FOR CERTIFICATE OF
RESIDENCE, PURSUANT TO SECTION 6305 OF THE EDUCATION LAW IN
CONNECTION WITH ATTENDANCE AT A COMMUNITY COLLEGE**

**STATE OF NEW YORK
COUNTY OF ALBANY**

1. CITY, VILLAGE, OR TOWN

2. APPLICANT'S NAME

3. STREET ADDRESS

CITY

STATE

ZIP

HOW LONG?

4. SOCIAL SECURITY #

5. ARE YOU A U.S. CITIZEN? YES

NO

6. PREVIOUS ADDRESS IF AT THE ABOVE IS LESS THAN ONE YEAR

HOW LONG?

7. I hereby affirm that I have been a resident of Albany County within the last six months or I have resided in Albany County for a period of _____ months within the last six months.

I further state that I plan to enroll in a New York State Community College and this affidavit (or affirmation) is made for the purpose of securing a Certificate of Residency from Albany County pursuant to the requirements of Article 126 of the Education Law.

8.

Date

Signature of Applicant

9. Sworn to (or affirmed) before me this

day of

20

10.

NOTARY PUBLIC OR COMMISSIONER OF DEEDS