

**RETURN FORM TO:**

North Dakota University System  
600 E Boulevard Avenue, Dept. 21  
Bismarck, ND 58505-0602

- c. I am a dependent child whose parent or guardian has been a legal resident of North Dakota for 12 months immediately prior to the beginning of the academic term or resides in the state with the intent to establish residency in the state for a period of years. **Attach copy of first page of parent's most recent federal income tax return).**

Name of parent or guardian \_\_\_\_\_

Parent's Address