

AFFIDAVIT OF DOMICILE

THIS FORM IS TO BE COMPLETED BY THE PARENT OR LEGAL GUARDIAN OF THE INDIVIDUAL SEEKING MY NOMINATION TO A UNITED STATES SERVICE ACADEMY. IF YOU ARE <u>NOT</u> A MINOR (UNDER 18 YEARS OF AGE), YOU MAY ALSO COMPLETE THE FORM.

-	d, permanent and principal home for legal purposes.
I,	, being of lawful age (18) and a resident - 18 YEARS AND OLDER
PARENT'S/GUARDIAN'S OR STUDENT'S NAME	- 18 YEARS AND OLDER
of .	. West Virginia.
CITY	,, West Virginia,
do on oath and under penalties of perjury, depose	e and say:
That I am the parent entitled to the custody of, or	r the legal guardian of,
	NAME OF APPLICANT
	he age of majority, who has applied to Senator Shelley Moored States Service Academy: that the said individual is either my h me or myself: and that our/my domicile is
ADDRESS, INCLUE	DING CITY/TOWN AND STATE
I am a member of the military/government contra	actor who is currently stationed at
ADDRESS, INCLUDING CITY/T	OWN AND STATE – LEAVE BLANK IF NOT APPLICABLE
This is in evidence thereof, I depose and say that	:
I am registered as a voter in	
CITY	COUNTY STATE
And I file income tax returns and pay income tax	xes to the State of
SIGNATUDE.	DATE.