2026-2027 HEAB Residency Worksheet

Based on your 2026-27 FAFSA, you currently are not eligible for state funds through the Higher Educational Aids Board (HEAB). Please provide the following information for yourself and parent(s) listed on your FAFSA.

Student Information:

1. Name: Student ID:
2. Current permanent address: City: State:
3. Date you began residing at this address:
4. Previous Address:

   City: State:
5. Date you began residing at this address:
6. Please list any other state(s) you have lived in:
7. Current place of employment:
8. Did you file 2024 Wisconsin income taxes? Yes No

Parent Information:

9. Parent's current permanent address: City: State:
10. Date parent(s) began residing at this address:
11. Parent's previous address:
12. Did parent(s) file 2024 Wisconsin income taxes? Yes No
13. Have you been claimed on your parent(s)' federal income tax return in the past 12 months?

    Yes No

***Copy of your Driver's License is required.**

_____ _____

Signature Date

Return requested documents to:

UW Oshkosh Financial Aid Office
Dempsey Hall 104
800 Algoma Blvd
Oshkosh, WI 54901-8604
Fax: 920-424-0284