

Residence and Tuition Status Application

Under North Carolina law, bona fide legal residents (domicillaries) of North Carolina are eligible for a lower tuition rate than non-residents. Copies of the applicable laws and of implementing University regulations are available for inspection in the Registrar's Office, 108 John Thomas Hall. In essence, the controlling North Carolina statute (G.S. 116 - 143.1) requires: "To qualify as a resident for tuition purposes, a person must have established legal residence (domicile) in North Carolina and maintained that legal residence for at least 12 months immediately prior to his or her classification as a resident for tuition purposes." G.S. 116-143.1 also sets forth statutory definitions, rules, and special provisions for determining resident status for tuition purposes. The residence *Manual*, located in the Registrar's Office, 108 John Thomas Hall, should be consulted for these statutory and regulatory conditions.

The law requires that prior to the term of enrollment every student admitted or readmitted to the University must be classified as a resident or non-resident for tuition purposes. To be classified a resident for tuition purposes; you must furnish such evidence as the University may require to enable it to make such classification.

IMPORTANT – READ THESE DIRECTIONS BEFORE COMPLETING THIS APPLICATION

1. **Answer ALL Questions.** Incomplete Forms Will Be Returned. If any question is not applicable to your own situation, write "not applicable."
2. **Print or Type All Responses.** If necessary, write "see attached" in the space provided, and use separate additional sheets, numbering your responses the same as the corresponding question and stapling these sheets to this application form.
3. **Be Completely Accurate** to the best of your knowledge and understanding. Knowing falsification of your responses may subject you to disciplinary action including dismissal from the institution. **When "Date" is requested, give Month, Day, and Year.**
4. **Sign and Date** this application where indicated to make those acknowledgements and certifications necessary to render this an acceptable application.
5. Applications must be received by the Registrar's Office **before 5pm on the filling deadline** of the academic term for which an applicant wishes to be considered for a change in residency status.
6. **EVIDENCE OF YOUR CLAIM TO NC RESIDENCE SHOULD BE SUBMITTED WITH YOUR APPLICATION.**

TYPE ALL RESPONSES OR PRINT THEM IN INK

1. Applicant student's full name _____
2. Student ID Number _____ Citizenship _____
(if not a U.S. citizen, attach completed Supplemental Form) If Supplemental Form attached, check here _____
3. Date of birth _____ Place of birth _____ Sex _____ Age _____
4. Current Mailing address street _____
city _____ State _____ Zip _____ Phone _____
Since (date) _____
5. Permanent home address street _____
city _____ State _____ Zip _____ Phone _____
Since (date) _____

6. Last previous home street address *in* North Carolina
_____ city _____ State _____
Zip _____ Phone _____
From (date) _____ To (date) _____

Last previous home street address *outside* North Carolina _____
city _____ State _____ Zip _____ Phone _____
From (date) _____ To (date) _____

7. Are you currently enrolled at ASU? Yes No Are you applying for admission? Yes No
Circle the earliest term and indicate the year in which you want this decision to apply and *circle* the program in which you are enrolling or applying:
a. Fall, 20____ Spring, 20____ First Summer, 20____ Second Summer, 20____
b. Classification: FR SO JR SR Graduate Non-Degree/Visiting

8. Secondary (high or preparatory) schools you attended in sequence:
Name Address (City and State) From (date) To (date)
a. _____
b. _____

9. List **ALL** post-secondary schools (universities, colleges, community colleges, etc) you have attended in sequence including ASU:
Name Address (City and State) From (date) To (date)
a. _____
b. _____
c. _____
d. _____

10. If at any time you have applied previously for a determination of your residence status for tuition purposes to **ANY** public college or university in North Carolina, for EACH
a. Give the name of the college or university _____
b. If your residence status was determined, circle classification resident non-resident
c. Indicate the term and year you were so classified _____

11. Father living? Yes No Name _____ Occupation _____
Permanent home address _____
Resided at above address since (date) _____

12. Mother living? Yes No Name _____ Occupation _____
Permanent home address _____
Resided at above address since (date) _____

13. Are your parents separate or divorced? Yes No If yes, who has/had custody of children? _____

14. Do you have a legal guardian other than a parent? Yes No

Name _____ Occupation _____

Permanent home address _____

Resided at above address since (date) _____

Court appointed at (place) _____ on (date) _____

15. Why and when did you move your home to North Carolina (reason)? _____

_____ on (date) _____

16. When and from what state or foreign country did you move your home and legal residence to North Carolina? Moved from _____ on (date) _____

17. When do you claim that you began your legal residence (domicile) in North Carolina (date)?

18. Who (excluding yourself) last claimed you as an exemption on state and/or Federal income tax returns, for what tax year and in what state filed?

a. On **state** return for _____ tax year, filed in (state) _____ on (date) _____

Name of person filing return _____ relationship to you _____

b. On **Federal** return for _____ tax year, filed in (state) _____ on (date) _____

Name of person filing return _____ relationship to you _____

c. Does anyone intend to claim you as a dependent on state and or/Federal income tax returns for the current tax year? Yes No If yes, who? _____

Relationship to you _____ Returns to be filed in what state(s) _____

19. List in chronological order to date of this application *all* places you have spent at least 7 (seven) consecutive days during the past three years. Your response must include your current address, all other places lived, and vacations. Attach additional paper if necessary.

Place (city and state) Occupation or Purpose from (date) to (date)

a. _____

b. _____

c. _____

d. _____

e. _____

20. When and where did you do each of the following during the last 24 months? List **EACH** time you did each act. If not done in the last 24 months, list **WHERE AND WHEN** such acts were completed the last time. If *never* done, write "never":

	State/Month/Day/Year	State/Month/Day/Year	State/Month/Day/Year
a. Voted	_____	_____	_____
b. Registered to vote	_____	_____	_____
c. Called to serve on jury duty	_____	_____	_____
d. <i>Acquired or renewed</i> driver's license	_____	_____	_____
e. Listed personal property for taxation	_____	_____	_____
f. Acquired ownership of property for use as your principal dwelling	_____	_____	_____
g. Filed state income tax return	_____	_____	_____
Did you file as a resident or non-resident?	_____	_____	_____
h. Had state income tax withheld during the current tax year? Yes No State(s) _____ Beginning (Month/Day/Year) _____ During the previous tax year? Yes No State(s) _____ Beginning (Month/Day/Year) _____			
i. Registered/licensed a motor vehicle (car, truck, or other requiring license)			
Type of vehicle (list all)	Where registered/licensed	Month/Day/Year	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	

21. The car(s) or other motor vehicles **which you maintain and operate** in North Carolina are owned by (name) _____ (address) _____
Registered/licensed in (state/foreign country) _____ and insured in the name(s) of _____
_____ address _____

22. List the addresses at which you own and maintain personal property (clothing, furniture, cars, boats, checking or savings accounts, pets, etc.) and give a percentage value (of total personal property) maintained at each address:

	Address	% at this address
a.	_____	_____
b.	_____	_____
c.	_____	_____
		100 %

23. List your employment for wages in the last 24 months:

	Job Title	Employer	Address (city and state)	from (dates) to	hrs. per week
a.	_____	_____	_____	_____	_____
b.	_____	_____	_____	_____	_____
c.	_____	_____	_____	_____	_____
d.	_____	_____	_____	_____	_____

24. List the sources and uses of the money required to meet your expenses:

	Preceding Calendar Year (Jan-Dec, 20__)		Current Calendar Year (Jan-Dec, 20__)	
	% of Total	Used For	% of Total	Used For
Your earnings	____%	_____	____%	_____
Your savings	____%	_____	____%	_____
Parent(s)/Guardian	____%	_____	____%	_____
Name	_____			
Loan	____%	_____	____%	_____
Type of Loan	_____			
Other (specify):	____%	_____	____%	_____
TOTAL	100%		100%	

25. If you (1) now live regularly with, (2) have lived with during the immediately preceding 24 months, or (3) continue to maintain close ties with and periodically live with, another person (who is a relative by blood, marriage, or court order or a legal guardian of the person), or (4) have been claimed within the immediately preceding 24 months as a dependent for taxation purposes by someone other than yourself, answer the following for each such persons. (Answer only for one adult person at each address.)

a. Name _____ Relationship to you _____

Permanent home address _____

Lived at this address since (date) _____ Last previous home address _____

_____ from (date) _____ to (date) _____

Is any such person now in, or a veteran of active military service or other Federal government employment? Yes No If yes, give home address upon entry

Official home address now _____

Date this address declared _____ Legal residence most recently claimed on DD Form 2058 (State of Legal Residence Certificate): _____

_____ Date that DD 2058 completed _____ Home address upon discharge _____ Date of discharge _____

b. **Where and when** did the above listed person do each of the following things during the last 24 months? List **EACH** time he or she did each act. If not done in the last 24 months, list **WHERE AND WHEN** such acts were completed the last time. If *never* done, write "never":

	State/Month/Day/Year	State/Month/Day/Year	State/Month/Day/Year
1. Voted	_____	_____	_____
2. Registered to vote	_____	_____	_____
3. Called to serve on jury duty	_____	_____	_____
4. <i>Acquired or renewed</i> driver's license	_____	_____	_____
5. Listed personal property for taxation	_____	_____	_____
6. Acquired ownership of property for use as your principal dwelling	_____	_____	_____
7. Inclusive dates of such property ownership	From _____ to _____	From _____ to _____	From _____ to _____
8. Filed state income tax return	_____	_____	_____
Did you file as a resident or non-resident?	_____	_____	_____
9. Registered/licensed a motor vehicle(s)	_____	_____	_____
10. Claimed you as an exemption on	State Income tax return for _____ tax year, filed in (state) _____ on _____		
	Federal income tax return for _____ tax year, filed in _____ on _____		

26. Are you now in, or a veteran of, active military service or other Federal government employment? Yes

No

If **YES** give your home address upon entry _____

Your official "home of record" _____

Your official home address now is _____

Date declared _____

Your home address upon discharge _____

Date of discharge _____

Legal residence you most recently claimed on DD Form 2058 (State of Legal Residence Certificate)

Date you completed this form _____ Place to Which you were paid mileage upon discharge _____ State for which income tax was withheld from your salary _____ From what date? _____

*If you or one of your parents are now in active military service, attach a copy of the "Leave and Earnings Statement" for the most recent pay period and for the period 12 months ago for each such person.

27. If there are additional circumstances, events, or acts that you feel support your claim to North Carolina legal residence (domicile) for tuition purposes, attach a description of each, specifying the place and date of its occurrence.

28. Notice: North Carolina provides certain tuition benefits for spouses, family members and military dependents. Persons who qualify for these benefits include spouses of North Carolina residents, spouses and dependents of active duty military personnel stationed in North Carolina and family members of deceased or disabled emergency workers. If you believe you qualify for these benefits, you should contact the Registrar's Office for a supplemental form. When you have completed the supplemental form, please submit both the form and a copy of your residency status application to the Registrar's Office.

- The applicant may be required to have his/her parent(s) or guardian(s) to complete a parents' affidavit if it is determined that the information contained therein would be important in deciding the residency status of the applicant.
- I hereby certify that all information I have set forth herein is true to the best of my knowledge, pursuant to my reasonable inquiry where needed.
- I hereby acknowledge that the institution may verify the information set forth herein from sources accessible under law to the institution but that the institution may divulge the contents of this application only as permitted under the Family Educational Rights and Privacy Act of 1974 if I am, or have been, in attendance at this institution.

Applicant's Signature

Date

Signature of parent or guardian if applicant is under 18 years of age

Date