



REQUEST FOR RESIDENCE RECLASSIFICATION FOR DEGREE-SEEKING STUDENTS

This form is used to establish residency status for tuition purposes for degree-seeking students who have previously attended FLORIDA ATLANTIC UNIVERSITY as non-residents and wish to be considered for in-state tuition rates.

Student Name: _____ SSN: _____

Term for which I request in-state tuition: _____ Daytime phone: (_____) _____

Legal permanent home address: _____

If under age 25, parent's complete name and address: _____

Country of Citizenship: _____ (If Non-U.S. CITIZEN) My Alien # is: _____ and/or my VISA type is _____ and I have read Section A. and have checked Part I, #6 below. (ATTACH COPIES OF ALL CURRENT IMMIGRATION DOCUMENTATION)
FAU E-mail address: _____

A Florida "resident for tuition purposes" is a person who (or a dependent person whose parent or legal guardian) has established and maintained legal residence in Florida for at least 12 months immediately preceding the first day of class for the term you wish to pay in-state fees. Residence in Florida must be as a bonafide domiciliary rather than for the purpose of maintaining a residence incident to enrollment at an institution of higher education. Other persons not meeting the 12 month legal residence requirement may be classified as Florida residents for tuition purposes only if they fall within one of the limited special categories authorized by the Florida Legislature and Board of Education (see below). All other persons are ineligible for classification as a Florida "resident for tuition purposes."

IMPORTANT

- a. To qualify as a Florida resident for tuition purposes, you must be a U.S. citizen, permanent resident alien, or a legal alien granted indefinite stay by the US Bureau of Citizenship and Immigration or in one of the following visa categories: A, E, G, H1, H4, I, K, L, N, O-1, O-3,R & NATO 1-7, which have been approved by the State of Florida for eligibility (all other residency requirements apply).
b. Living in or attending school in Florida will not, in itself, establish legal residence.
c. Students who depend on out-of-state parents for support or are claimed as a federal tax exemption are presumed under the law to be legal residents of the same state as their parents.
d. Residence in Florida must be for the purpose of establishing a permanent home and not merely for enrollment at an institution of higher education.
e. Documents supporting the establishment of legal residence must be issued or filed 12 months before the first day of classes of the term for which a Florida resident classification is sought.

PART I. DEFINITIONS (Please check all that apply)

(Copy of the student's most recent tax return or other documentation may be requested to establish dependence/independence status)

- 1. I am an independent person (I provide more than 50% of my support) and have maintained legal residence in Florida for at least 12 months. If I'm under age 25, a copy of my parent's most recent tax return will be provided in addition to all other documents.
2. I am a dependent person (50% or more of my support is provided by another as defined by the IRS) and my parent or legal guardian has maintained legal residence in Florida for at least 12 months. (A copy of their most recent tax return on which I was claimed as a dependent or other proof of dependency is enclosed.)
3. I am a dependent person who has resided for five years or more with an adult relative other than my parent or legal guardian and my relative has maintained legal residence in Florida for at least 12 months not primarily to attend an institution of higher education. (A copy of their most recent tax return on which I was claimed as a dependent or other proof of dependency is enclosed.)
4. I am married to a person who has maintained legal residence in Florida for at least 12 months. I have established legal residence and intend to make Florida my permanent home. (Copy of my marriage certificate is enclosed.) If my spouse is an FAU student his/her name and social security numbers are: _____
5. I was previously enrolled at a Florida state institution and classified as a Florida resident for tuition purposes. I abandoned my Florida domicile less than 12 months ago, and am now re-establishing Florida legal residence. (A copy of my proof of prior classification is enclosed.)
6. According to the US Bureau of Citizenship and Immigration, I am a permanent resident alien or other legal alien granted indefinite stay. I have maintained domicile in Florida for at least 12 months. (A copy of my INS documentation is enclosed.) All other residency requirements apply.
7. I am a member of the armed services of the United States and am stationed in Florida on active military duty pursuant to military orders, or whose home of record is Florida or I am the member's spouse or dependent child. (A copy of my or my spouse's/parent military orders or documents showing home of record is enclosed.)
8. I am a full-time instructional or administrative employee employed by a Florida public school, community college or institution of higher education or I am the employee's spouse or dependent child. (A copy of my or my spouse's/parent employment verification is enclosed.)
9. I am part of the Latin American/Caribbean scholarship program. (A copy of scholarship papers is enclosed.)
10. I am a full-time employee of a state or local agency taking job-related law enforcement or corrections training paid for by my employer. (A copy of my employment verification is enclosed.)
11. I am a qualified beneficiary under the terms of the Florida Pre-Paid Postsecondary Expense Program (S. 240.551, F.S.). (A copy of my proof of plan is enclosed.)
12. I am a Southern Regional Education Board Academic Common Market graduate student. (A copy of my proof of scholarship is enclosed.)

OVER - BOTH SIDES OF THIS FORM MUST BE COMPLETED!
OFFICE USE ONLY

Approved _____ Denied _____ Code _____ Date _____ Init. _____

Posted: 7 _____ 110 _____ 111 _____ Letter sent _____ reclass.lwp rev. 09/2005

PART II. DOCUMENTATION – The person claiming residency should complete and document the following sections (1-4). If an independent person, that will be the student; if a dependent person, that will be the parent or legal guardian; if the application is based upon the residency of a spouse, the information should be on both you and your spouse. **COPIES OF ALL DOCUMENTATION IS REQUIRED AND SUBJECT TO VERIFICATION.**

1. PHYSICAL PRESENCE – DOCUMENTATION SUCH AS LEASES, DEED, DORM AGREEMENT, ETC. MUST BE PROVIDED FOR ALL ADDRESSES WITHIN THE LAST 12 MONTHS. (Indicate type of residence as follows: lease, own, rent room, family home, dorm.)

Current address: _____

How long have you resided at this address? _____ years _____ months (TYPE _____)

Previous address: _____

How long did you reside at this address? _____ years _____ months (TYPE _____)

If the above addresses do not total 12 months, please account for the other months: _____

ADDITIONAL VERIFICATION FOR PHYSICAL PRESENCE – documentation must be provided for the following:

BANK ACCOUNT: (Attach copies of early and late bank statements or letter from bank.)

Name and location of bank: _____ Date acc't opened: _____ Is it an active account? _____

SCHOOL(S) – other than FAU:

Name/City/State _____ Dates attended: from/to _____ full-time/part-time _____

OCCUPATIONAL LICENSE: (Attach copy of license/certificate.)

Type of License: _____ State _____ Date Issued: _____

CLUB MEMBERSHIP: (Attach copy of Membership Card/Certificate.)

Name/type/location of club(s): _____ Dates of membership: from _____ to _____

EMPLOYMENT – [Provide letter(s) on **company letterhead** stating **dates of employment in Florida**, average hours worked per week, whether **full- or part-time status.**]

1) Employer's name/address/phone: _____

Dates employed: from _____ to _____ full-time? _____ part-time? _____ Average hours worked per week? _____

2) Employer's name/address/phone: _____

Dates employed: from _____ to _____ full-time? _____ part-time? _____ Average hours worked per week? _____

2. LEGAL RESIDENCE – IT IS EXPECTED THAT AT LEAST ONE OF THE FOLLOWING BE DATED, ISSUED OR FILED AT LEAST 12 MONTHS PRIOR TO THE FIRST DAY OF CLASSES FOR THE TERM FOR WHICH FLORIDA RESIDENT CLASSIFICATION IS SOUGHT: (Attach copies)

Drivers License: State _____ Date Issued _____ Number _____

Voter Registration: State _____ Date Issued _____ Number _____

Vehicle Registration: State _____ Date Issued _____ Decal # _____

Declaration of Domicile: Date filed _____ Date established residence _____ County _____

3. INTENT – FLORIDA STATUTES SPECIFY THAT YOUR INTENT FOR BEING IN FLORIDA IS NOT PRIMARILY FOR EDUCATIONAL PURPOSES. The following information is used to determine the intent of the applicant:

Have you been employed in Florida during the last 12 months? Yes _____ No _____ If so, complete the "Employment" section above and provide documentation as outlined.

Do you own a home in Florida? Yes _____ No _____ If so, provide copy of deed, homestead exemption, etc.

PART III. AFFIDAVIT – THIS SECTION MUST BE SIGNED BY THE PERSON CLAIMING RESIDENCY

I do hereby swear and affirm that the information provided above for the purpose of obtaining Florida residency for tuition purposes is true and correct. **I UNDERSTAND THAT A FALSE STATEMENT IN THIS AFFIDAVIT WILL SUBJECT ME TO PENALTIES FOR MAKING A FALSE STATEMENT PURSUANT TO 837.06 OF THE FLORIDA STATUTES. I ALSO UNDERSTAND THAT THE UNIVERSITY IS EMPOWERED TO REQUIRE ADDITIONAL INFORMATION OR DOCUMENTATION IF DEEMED NECESSARY.**

Signature of person claiming Florida residency _____

Date _____