CSU Residence Reclassification Request Form

THIS FORM MUST BE RETURNED TO THE CAMPUS FROM WHICH YOU ARE REQUESTING RECLASSIFICATION.

Name _____ Social Security No. _____
First Middle Initial Last

Present Address _____ Birth Date _____/_____/_____
Month Day Year

_____ Phone No. (_____) _____
City State Zip Code

Term applying for _____ CSU Campus _____ Email: _____
Term Year Specify Campus Location

The information requested is deemed relevant and necessary to a proper determination of your residence status for tuition purposes pursuant to Education Code Section 68041. Failure to answer all questions may cause you to be classified as a nonresident. You may submit other information that you believe will establish your California residence. Questions about residence regulations should be referred to a campus residence specialist. A summary of the regulations is printed in campus catalogs and in the application for admission booklet. If you disagree with the campus residence determination, you have the right to appeal that decision to the Office of General Counsel, The California State University, 401 Golden Shore, 4th Floor, Long Beach, California 90802-4210 within 120 days from the date of the residence determination. Note: You may be requested to furnish documentation in support of your responses.

1. If you will be 19 years of age or older by the residence determination date, check here and Answer 2 through 16 as they pertain to you. ☐

   If you will be younger than 19 years of age by the residence determination date, check here and answer 2 through 16 as they pertain to the natural or adopted parent with whom you most recently resided and whose name and whereabouts you will provide below. ☐

   Name/Relationship _____

   Present actual whereabouts _____

Residence Determination Dates

Quarter Calendars		Semester Calendars	
Fall	September 20	Fall	September 20
Winter	January 5	Winter	January 5
Spring	April 1	*(Stanislaus only)*	
Summer	July 1	Spring	January 25
		Summer	June 1

CalState TEACH

Stage 1	September 20	Stage 3	June 1
Stage 2	January 5	Stage 4	September 20

2. What state do you regard as your permanent home? _____ 3. If California, when did your present stay begin? _____/_____/_____
Month Day Year

4. Are you claimed as a dependent on the military record of any member of the U.S. armed forces? Yes ☐ No ☐

   If "yes," explain the relationship and answer No. 6 as it pertains to the military member. Member's relationship to student is _____

5. Member or veteran of U.S. armed forces? Yes ☐ No ☐ Date joined _____ From what state _____ Date separated from active duty, if any _____

6. Most recent permanent address on military records _____

   Stationed at _____ From _____ To _____

7. Ever registered to vote? Yes ☐ No ☐ If yes: State _____ Date registered _____/_____/_____ Last Voted _____/_____/_____
Month Day Year Month Day Year

   State _____ Date registered _____/_____/_____ Last Voted _____/_____/_____
Month Day Year Month Day Year

8. Possess driver's license and/or ID Card? Yes ☐ No ☐ If yes: State _____ Date issued _____/_____/_____ State _____ Date issued _____/_____/_____
Month Day Year Month Day Year

9. Current registration of all vehicles owned or operated in CA State _____ Date issued _____/_____/_____ State _____ Date Issued _____/_____/_____
Month Day Year Month Day Year

10. Are all personal effects located in California? Yes ☐ No ☐ If "No," attach explanation.

11. List all places you have lived prior to your most recent arrival in California, the dates you lived in each place and the parent you resided with.
    If you need more room, please attach an explanation on a separate sheet of paper.

From (Date)	To (Date)	State or Country	Parent you resided with

(Rev. 08/07)

12. Purchase date(s) and location(s) of California residence(s) owned Date _____/____/____ Location _____
Month Day Year

Date _____/____/____ Location _____
Month Day Year

13. Purchase date(s) and location(s) of other residence(s) owned Date _____/____/____ Location _____
Month Day Year

Date _____/____/____ Location _____
Month Day Year

14. Source(s) of financial support for the past year?

_____

15. Employed in California in the past year? Yes ☐ No ☐ Employer _____ From _____/_____/_____ To _____/_____/_____
Month Day Year Month Day Year

Employer _____ From _____/_____/_____ To _____/_____/_____
Month Day Year Month Day Year

16. State where last three state income tax returns filed on total income and year covered by each. State _____ Year _____ State _____ Year _____ State _____ Year _____

17. Address shown on most recent W-2 form

_____

18. Active California banking account(s) _____/____/_____ _____/____/_____
Bank and Date Account Opened Month Day Year Bank and Date Account Opened Month Day Year

19. Did you attend California High School for 3 years and graduate or obtain a California G.E.D.? Yes ☐ No ☐

Student Financial Independence Status

Education Code Section 68044 requires that the financial independence of a nonresident student seeking reclassification as a resident be included in the factors to be considered in the determination of residence. Therefore, please answer all of the following questions. Failure to provide complete information may result in nonresident classification (Ed Code 68041).

1. Will your parent(s) claim you as a dependent exemption for state and federal tax purposes for the current calendar year?..... Yes ☐ No ☐
2. Were you claimed as an exemption for state and federal tax purposes by your parent(s) in any of the past three calendar years?..... Yes ☐ No ☐
3. Have you received or will you receive more than $750 in financial assistance from your parent(s) in the current calendar year?..... Yes ☐ No ☐
4. Did you receive more than $750 in financial assistance from your parent(s) during any of the three past calendar years? ..... Yes ☐ No ☐
5. Have you lived or will you live for more than six weeks with your parent(s) during the current calendar year? ..... Yes ☐ No ☐
6. Did you live for more than six weeks with your parent(s) during any of the three past calendar years? ..... Yes ☐ No ☐
7. Are your parents California residents? ..... Yes ☐ No ☐

Certification – to be read and signed by all students completing this form

I certify under penalty of perjury that the foregoing statements and any other information submitted by me in connection with the determination of my residence are true, complete, and accurate. I certify that so long as I am a student at this institution, I will advise the residence specialist if there is a change in any of the facts upon which the residence determination was made, such as the state of residence and military status of my parent if I am a minor or, if not, changes in any of the above for me or my spouse, if any; changes in the California State University employment status of my spouse, parent, or myself; or changes in my teaching employment or credential status. I authorize release of any information submitted by me in connection with my application for admission and determination of residence to any person, firm, corporation, association or government, whether federal, state, local, or foreign, but only as necessary to verify or explain the information, to obtain pertinent records, or in connection with perjury proceedings.

Signed at _____
City and County Applicant's Signature Date

Print Form