



For Office Use Only

Student _____

Decision: _____

Date application initially filed: _____

Effective Date: _____

Date application completed: _____

By: _____

Term for which application applies: _____

Signed: _____

Institutional Official

Date of first day of classes for which applicant seeks reclassification: _____

Date: _____

Application filed in a timely manner? _____

Case/File I.D.: _____

**STATEMENT AND AFFIDAVIT
FOR RESIDENCY CLASSIFICATION
AT KENTUCKY PUBLIC COLLEGES AND UNIVERSITIES**

The "Determination of Residency Status for Admission and Tuition Assessment Purposes" is to be used by each public college and university pursuant to KRS 164.020 and KRS 164.030 and is codified as 13 KAR 2:045. These institutions are Eastern Kentucky University, Kentucky State University, Morehead State University, Murray State University, Northern Kentucky University, University of Kentucky, University of Louisville, Western Kentucky University, and the Kentucky Community and Technical College System Colleges.

GENERAL INSTRUCTIONS

Special instructions precede sections of the affidavit. These general instructions apply to the total affidavit.

- ***13 KAR 2:045 should be read in its entirety before completing this statement since the procedures and definitions of the regulation will be applied in determining residency classification.***
- ***Answer all questions that apply to your situation and provide all the applicable documentation on the attached list of required documents.***
- ***Mark all items in affidavit form. If item is not applicable, indicate with "N/A."***
- ***This document must be notarized before its submission.***
- ***All items marked with an asterisk (*) must have accompanying documentation.***
- ***Please note Section 3 of the Regulations, entitled "Determination of Residency Status: General Rules"***

I. BASIS FOR APPLICATION

Please indicate below the basis of your application for residency status for tuition and admission purposes. After checking the appropriate statement, please explain further in the section provided for additional comments pertinent to your residency status.

I have read the residency regulation “*Determination of Residency Status for Admission and Tuition Assessment Purposes,*” 13 KAR 2:045, and I wish to request review of my status primarily on the basis indicated below:

- _____ Independent person demonstrating domicile and residency in Kentucky.
- _____ Dependent person seeking residency and domicile of resident _____ parent(s) or _____ legal guardian.
- _____ Seeking Kentucky residency status provided under Section 7 of 13 KAR 2:045. (Duty in the armed forces)
- _____ Beneficiary of a Kentucky Educational Savings Plan Trust.

II. ENROLLMENT INFORMATION

1. Have you previously filed an application for determination of residency status? Yes No

If yes, for what term? _____

2. Indicate the term (one term only) for which this application should be considered:

- Fall 20 _____ Spring 20 _____
- Summer Term 20 _____ Specify summer term _____

3. Are you currently enrolled in a Kentucky college or university? Yes No

If no, for which term do you plan to enroll? _____
Term Year

If yes, which institution: _____

4. Check one: Undergraduate Graduate Law
 Medicine Dentistry Pharmacy

How many credit hours are you currently taking? _____, or will be taking?

III. PERSONAL INFORMATION

Please note that item No. 6, “present address,” requires documentation. This may include either proof of housing ownership or long-term lease. Items marked with an () require documentation.*

1. Name: _____
Last First Middle Maiden, Jr., II, etc.

2. Social Security Number: _____

3. Birthdate: Month _____ Day _____ Year _____

4. State and Country of Birth: _____
State Country

5. Permanent Address: _____
Number Street

_____ City County State Zip

* 6. Present Address: _____
Number Street

_____ City County State Zip

7. To which address should this decision be sent: Permanent Present

8. Phone Number: Home (_____) _____ Work (_____) _____
Area Code Number Area Code Number

IV. DETERMINATION OF DEPENDENT/INDEPENDENT STATUS

“Dependent” status and “independent” status are defined in Sections 1 (5) and 1 (9) of the “Determination of Residency Status for Admission and Tuition Assessment Purposes.” The criteria for claiming independent status may be documented pursuant to Section 5. A dependent person has the domicile of his or her parents; an independent person has the opportunity to establish domicile in Kentucky. Items marked with an () require documentation.*

All tax forms must include filer’s name, signature and date.

* 1. Did you file a federal or state income tax return as an independent person claiming yourself as an exemption?
Federal income tax forms? Yes No State income tax forms? Yes No
If yes, for what most recent year? _____

* 2. Did either of your parents claim you as a dependent for the tax year preceding the date of this application on federal or state income tax forms?
Federal income tax forms? Yes No State income tax forms? Yes No
If no, when did either of your parents last claim you as an exemption on a:
Federal income tax form? _____ State income tax form? _____

3. Does your parent or any other person currently claim you as a dependent or exemption for federal or state tax purposes?
Parent? Yes No Other Person? Yes; who? _____ No

* 4. Indicate the present means of your financial support and sustenance.

Please see definition of sustenance in Section 1 (16) of the residency regulation. Please list dollar amounts for each category below. Amounts must be based on a calendar year.

ANNUAL SUPPORT

<u>Work</u>	<u>Spouse</u>	<u>Parent</u>	<u>Other Persons</u>
\$ _____	\$ _____	\$ _____	\$ _____
<u>Scholarships</u>	<u>Grants</u>	<u>Assistantships</u>	<u>Loans</u>
\$ _____	\$ _____	\$ _____	\$ _____
<u>Agency</u>	<u>Financial Institutions</u>	<u>Trusts</u>	<u>Other</u>
\$ _____	\$ _____	\$ _____	\$ _____

For other, please explain. _____

When did your parent(s)/legal guardian last provide you with any of the above-listed support?

Month _____ Year _____

Please provide any additional information not specifically requested on the list of supporting documents but which may explain the nature of the financial support available to you.

V. INFORMATION IN SUPPORT OF DOMICILE

Items marked with an () require documentation. This documentation may include, but not be limited to, the following: deeds, leases, letters from employers, income tax returns, property tax receipts, vehicle registrations, driver's license, voter registration, and military records, etc.*

1. When did your present (i.e. your latest) stay in Kentucky begin?

Month _____ Day _____ Year _____

2. What was your primary reason for coming to Kentucky?

What is your primary reason for being in Kentucky at this time?

3. What family do you have presently living in Kentucky?

Pursuant to Section 8 (2) of the residency regulation, a person holding a permanent residency visa or classified as a political refugee shall establish domicile and residency in the same manner as any other person. In addition to holding a permanent residency classification, a person must demonstrate domicile by a preponderance of evidence.

The Kentucky Educational Savings Plan was established as an investment program for beneficiaries to defray the cost of higher education in the Commonwealth of Kentucky. 13 KAR 2:045 provides for beneficiaries of this program to be granted residency status for tuition purposes, if they meet the criteria set forth in Section 9.

* 8. Are you receiving benefits from the Kentucky Educational Savings Plan, covered under a vested participation agreement?

Yes No

a. Have you maintained continuous residence in the Commonwealth of Kentucky for eight consecutive years while participating in the KESP program?

Yes No

b. Did you enroll in an institution of higher education in Kentucky prior to enrollment in any other educational institution?

Yes No

* 9. Have you lived in Kentucky while enrolled in 6 or fewer hours for the 12 months preceding the first day of classes of the term for which you are applying?

Yes No

All tax forms must include filer's name, signature and date.

* 10. Did you file a Kentucky state income tax return for either or both of the past two years?

Yes No

If yes, please indicate year(s). _____

* 11. Have you accepted full-time employment or transfer to an employer in Kentucky? Yes No

Have you accepted full-time employment or transfer to an employer in an area contiguous to Kentucky while maintaining domicile in Kentucky?

Yes No

12. List your employers for the past five years (beginning with the most recent):

Dates		Employer	City/State	Average Number	
From Mo/Yr	To Mo/Yr			Hrs/Wk	Wk/Yr

* 13. Do you have licensing or certification for professional or occupational purposes in Kentucky?

Yes No

If yes, what type? _____

14. Have you paid the following taxes in Kentucky during the 12 months preceding the first day of classes of the term for which you are seeking a determination of residency status?

* Occupational Yes No

* Real property Yes No

* 15. What real property do you, your parents, legal guardian, or spouse own and in which state is it located? Indicate which property is used by you as a residence.

<u>Property Owned By</u>	<u>Location of Property Owned</u>	<u>Used by Student for Residency (Y/N)</u>	<u>Dates Used as Residence From (Mo/Yr) To (Mo/Yr)</u>

* 16. Do you have a lease for 12 months or more for noncollegiate housing in Kentucky?

Yes No

* 17. Do you operate a motorized vehicle in the state of Kentucky? Yes No

If yes, is this vehicle registered in your name? Yes No

If no, in whose name is the vehicle registered?

_____ State in which vehicle is registered _____ Vehicle License Number _____

If you do not operate a vehicle, what is your means of transportation?

Number of miles you travel to campus _____ Number of miles you travel to work _____

* 18. Driver's License Number: _____

State in which license was issued: _____

19. Where do you live during school vacation periods?

Kentucky

Other (specify) _____

* 20. Are you currently registered to vote? Yes No

If yes, where? Kentucky Other (specify) _____

Have you ever been registered to vote in a state other than where you are currently registered?

Yes No

If yes, where and when were you last registered? State _____ Year _____

Responses to the following items regarding military service may have some bearing on your classification if any part of Section 7 is relevant to your situation.

* 21. Are you now, or have you been, in the military? Yes No

If yes, please supply the following information.

When did you become an active member of the military? Month _____ Year _____

List active military service. (Exclusion of time spent in the Reserves)

From _____ to _____
Mo/Yr Mo/Yr

Was Kentucky your state of residency when inducted?
Yes No (specify) _____

If no, what date, if any, did address change to Kentucky? Month _____ Year _____

Did you maintain, or are you maintaining, Kentucky as your legal residence while in the service?
 Yes No

Date of discharge: _____
Month Year

Section VI, Supporting Information, relates to the basis for your request for determination of residency status, and you should complete all relevant items in this section. Completion is required if your relationship to any individual mentioned is relevant to residency in Kentucky; however, some of this information may still be relevant if you are filing as an independent person in your own right.

VI. SUPPORTING INFORMATION

1. Parents

Father's Name: _____

Father's Permanent Address: _____

Father's Mailing Address: _____

City _____ State _____

Father's Telephone Number: (_____) _____

How many years (continuously) has your father been living in Kentucky, if at all?

* Provide the following information on your father's current employer:

Name: _____

Address: _____

Phone: (____) _____

Date Current Employment Began:

Month

Year

* Father's Visa Type, if applicable: _____

Mother's Name:

Mother's Permanent Address: _____

Mother's Mailing Address: _____

City _____ State _____

Mother's Telephone Number: (____) _____

How many years (continuously) has your mother been living in Kentucky, if at all?

* Provide the following information on your mother's current employer:

Name: _____

Address: _____

Phone: (____) _____

Date Current Employment Began: _____

Month

Year

* Mother's Visa Type, if applicable: _____

2. **Legal Guardian** (complete if applicable)

Legal Guardian's Name: _____

Legal Guardian's Permanent Address: _____

Legal Guardian's Mailing Address:

City _____ State _____

Legal Guardian's Telephone Number: (____) _____

How many years (continuously) has your legal guardian been living in Kentucky, if at all? _____

*

Indicate date of guardianship: _____

Month

Year

* Provide the following information on your legal guardian's current employer:

Name: _____

Address: _____

Telephone Number: (_____) _____

Date legal guardian's current employment began: _____

* Guardian's Visa Type, if applicable:

Marriage to a Kentucky resident may be a factor in determination of your residency status Section 10 (2)(k). If your spouse has fulfilled requirements for residency and domicile in Kentucky, it is very important that this section be completed and accompanied by supporting documentation. If you are filing this application as an independent person in your own right, several items in this part of the affidavit may still be supportive of your own claim to residency and domicile.

3. **Spouse**

Name of spouse: _____

* Date of marriage: _____
Month Year

What family does spouse have presently living in Kentucky? _____

List of spouse's place(s) of residence for at least the past 5 years (beginning with the most recent address):

Dates		Place of Residence		
From (Mo/Yr)	To (Mo/Yr)	Number, Street	City	State

List the name of spouse's high school, state located, and date of graduation or GED:

School Name: _____

City: _____ State: _____

Date of Graduation or GED: _____
Month Day Year

List educational institution(s) attended by spouse since high school (beginning with the most recent);

<u>Educational Institution</u>	<u>City/State</u>	<u>Dates Attended</u>		<u>Full-time/Part-time</u>	<u>Residency for Tuition Purposes (In-State or Out-of-State)</u>
		<u>From Mo/Yr</u>	<u>To Mo/Yr</u>		

List spouse's employer for the past 5 years (beginning with most recent):

<u>From (Mo/Yr)</u>	<u>To (Mo/Yr)</u>	<u>Employer</u>	<u>City/State</u>	<u>Average Number</u>	
				<u>Hrs/Wk</u>	<u>Wk/Yr</u>

All tax forms must include filer's name, signature and date.

* Did your spouse file a Kentucky state income tax return for either or both of the past two years? Yes No
 If yes, please indicate years. _____

* Did your spouse file a federal or state income tax return as an independent person claiming you as an exemption?
 Federal income tax forms? Yes No State income tax forms? Yes No
 If yes, for what most recent year. _____

* Did either of your spouse's parents claim your spouse as a dependent for the tax year preceding the date of this application on federal or state income tax forms?
 Federal income tax forms? Yes No State income tax forms? Yes No
 If no, when did either of your spouse's parents last claim your spouse as an exemption on a:
 Federal income tax form? _____ State income tax form? _____

* Indicate your spouse's present means of financial support and sustenance.

Please see definition of sustenance in Section 1 (16) of this residency regulation. Please list dollar amounts for each category below. Amounts must be based on a calendar year.

Please note Section 3 of 13 KAR 2:045, "Determination of Residency Status for Admission and Tuition Assessment Purposes."

Section 3. Determination of Residency Status: General Rules. A student who gives incorrect or misleading information to institution officials may be subject to criminal prosecution and to such disciplinary sanctions as may be imposed by the institution through a policy written and disseminated to students.

A penalty or sanction because of incorrect information shall include but not necessarily be limited to the payment of nonresident tuition for each academic term for which tuition was assessed based on an improper determination of residency status.

OATH AND AUTHORIZATION FOR USE OF RECORDS

To the Student: This statement must be notarized before returning. Do not sign this statement until you are directed to do so by a Notary.

State of _____

County of _____

The undersigned person, being first duly sworn, states as follows: That the foregoing statements and all supporting documents are, and each of them is, true and correct. That any and all of my documents maintained by this institution may be released to the Committee or its designated representative to be used by that Committee or its representative in the determination of my status as a resident or nonresident of the Commonwealth of Kentucky for admission and tuition assessment purposes.

Signature of Applicant

Subscribed and sworn to before me this _____ day of _____, 19____.

Notary Public

County of _____

My commission expires _____.

PLEASE REVIEW YOUR APPLICATION FOR REVIEW OF RESIDENCY STATUS AND MAKE SURE THAT YOU HAVE MET THE APPLICATION DEADLINE AND

- included accurate dates
- provided complete financial support information
- indicated complete addresses
- provided complete tax filing and withholding information
- completed the comments section giving an overview of your circumstances and any special considerations
- provided documentation to verify the information in the affidavit (all photocopies must be legible and must include essential information)
- signed the appropriate section of the form
- obtained notarization of your signature