

CUNY RESIDENCY FORM: Part A

1. Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_
2. Soc.Sec.No. \_\_\_\_\_ Date of Birth \_\_\_\_\_ Phone No.( ) \_\_\_\_\_
3. Are you a U.S. citizen? Yes  No  Are you a permanent resident alien? Yes  No   
Are you here on a visa? Yes  No  Type: \_\_\_\_\_ Expiration Date: \_\_\_\_\_
4. Did you attend a New York high school for two or more years, and graduate from that high school?  
Yes  No  If yes, high school name and location \_\_\_\_\_  
Period of Attendance \_\_\_\_\_ Graduation Date \_\_\_\_\_
5. Do you have a GED issued by NYS? Yes  No  Date Issued: \_\_\_\_\_

If you answered "yes" to question 4 or 5 and are a U.S. citizen or permanent resident alien, you do not need to complete any further sections of this form.

If you answered "yes" to question 4 or 5 and do not currently have lawful immigration status but have filed an application to legalize your immigration status or will file such an application as soon as you are eligible to do so, you must complete Part B of this Residency Form (affidavit) before a Notary Public.

If you answered "no" to question 4 or 5 and are a U.S. citizen, permanent resident alien, or have a visa type eligible to qualify for resident tuition, you must complete Part C of this Residency Form.

Please refer to the instructions to complete this form for a comprehensive list of eligible visa types.

To Be Completed by All Students

I certify that all information provided and all statements made in all sections of this Residency Form are true and correct to the best of my knowledge.

I understand that if I provide false information or withhold relevant information in order to obtain the resident tuition rate, The City University may revoke its determination of in-state residency, and that I will owe non-resident tuition to the University for each semester or session that I have attended under these circumstances. I also understand that I may be subject to disciplinary action.

DATE \_\_\_\_\_ STUDENT SIGNATURE \_\_\_\_\_

- ***The college will not review any residency determination unless the request for the review is made, and all the required documentation is submitted on or before the last day of finals for the semester for which resident tuition is being sought.***
- ***If the College finally determines that you are non-resident, you may appeal by notifying the Registrar's Office (or other designated college appeal office) in writing within ten days of the adverse decision. At that time you may submit a statement indicating why you disagree with the College's decision. The Registrar (or other designated official) will submit the City University Residency Form, copies of all documentation provided by you and any statement made by you, along with the College's determination, to the University's Office of the Vice Chancellor for Legal Affairs and General Counsel which will render a decision on your appeal.***

CUNY RESIDENCY FORM: Part B

Affidavit of Intent to Legalize Immigration Status

\_\_\_\_\_, being duly sworn, deposes and says that he/she does not currently have  
(Student's Name)  
lawful immigration status but, has filed an application to legalize his/her immigration status or will file such  
an application as soon as he/she is eligible to do so.

\_\_\_\_\_  
(Student's Signature)

Sworn to me this \_\_\_\_\_ day of the month of \_\_\_\_\_, 20\_\_\_\_  
\_\_\_\_\_, State of New York, County of \_\_\_\_\_.



CUNY RESIDENCY FORM: Part C

Semester: \_\_\_\_\_

1. Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

2. Soc.Sec. No. \_\_\_\_\_

3. Current Address \_\_\_\_\_

A. Live with parents \_\_\_\_\_, or other relatives \_\_\_\_\_, or other than a relative \_\_\_\_\_

1) If other relatives, describe relationship. \_\_\_\_\_

2) If other than a relative, describe situation. \_\_\_\_\_

List below all your addresses, including temporary addresses and summer addresses during the past 12 months, starting from your current address and working backwards.

<u>FROM</u>	<u>TO</u>	<u>COMPLETE ADDRESS</u>
Mo __ Day __ Yr __	Mo __ Day __ Yr __	_____ STREET
Mo __ Day __ Yr __	Mo __ Day __ Yr __	_____ CITY STATE ZIP
Mo __ Day __ Yr __	Mo __ Day __ Yr __	_____ STREET
Mo __ Day __ Yr __	Mo __ Day __ Yr __	_____ CITY STATE ZIP
Mo __ Day __ Yr __	Mo __ Day __ Yr __	_____ STREET
Mo __ Day __ Yr __	Mo __ Day __ Yr __	_____ CITY STATE ZIP

4. A. Parents' permanent address \_\_\_\_\_  
STREET  
CITY STATE ZIP

B. If you are under the age of 18, does anyone other than your parents serve as your legal guardian?  
Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what is their name and address? \_\_\_\_\_

C. Where did you live during the last June through August period? If different from 4.A., give reason for being elsewhere during period \_\_\_\_\_

5. A. Please list below all full-time and part-time employment (including summer employment and voluntary activities) during the past twelve months starting with the most recent employment.

<u>EMPLOYER</u>	<u>ADDRESS</u>	<u>FROM</u>	<u>TO</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5. B. What is the source of your support? \_\_\_\_\_  
\_\_\_\_\_

C. Did you file a New York City/State resident income tax return during the past 12 months? \_\_\_\_\_

D. Did you file a Federal income tax return during the past 12 months? \_\_\_\_\_

6. What are your purposes for residing in New York City or New York State? \_\_\_\_\_

7. Have you applied for any financial aid, scholarships, or other benefits provided under the laws of the State of New York or the United States? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, specify and indicate what benefits you are receiving. \_\_\_\_\_  
\_\_\_\_\_

8. Do you presently intend to permanently live in New York City or New York State?  
Yes \_\_\_\_\_ No \_\_\_\_\_ Uncertain \_\_\_\_\_ If uncertain, please explain. \_\_\_\_\_  
\_\_\_\_\_

9. Do you have any explanation you wish to present as a reason for not submitting any of the required documents supporting residency determination? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please provide details. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Do you have any other proof other than the items indicated on the attached instructions for completing the Residency Form you wish to present in support of your application to be declared a resident of York City/State for City University tuition purposes? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please provide details and attach relevant documents.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_