Instructions to Apply for New York State Residency

NOTE: ALL DOCUMENTATION SUBMITTED MUST PERTAIN TO THE LAST 12 MONTHS. SUBMIT PHOTOCOPIES, DO NOT SUBMIT ORIGINAL DOCUMENTS. RETURN A COPY OF THIS SHEET WITH YOUR DOCUMENTS. WE WILL ONLY REVIEW A COMPLETE APPLICATION PACKAGE.

The State University of New York’s residency policy states: “...an individual University registrant will be considered a New York State resident and be charged in-state tuition rates when that individual is determined to have had a New York State domicile (i.e., a permanent and principal home in New York. A Residence Hall is not generally considered a permanent home) for a 12 month period prior to registration. Persons who do not meet this 12 month durational requirement will be presumed to be out-of-state residents and should be charged out-of-state tuition rates unless satisfactory proof is presented to show that domicile in New York State has, in fact, been established, notwithstanding the durational requirement.”

Institutional Policy: The determination of New York State residency is not based on any one item of documentation. Instead, a number of items are reviewed to verify residency status.

Accepted Applicants who wish to be considered for New York State Residency status must submit documentation to The Office of Admissions 450 Clarkson Avenue, MSC 60, Brooklyn, NY 11203. Continuing students should submit their documentation to The Office of the Registrar, 450 Clarkson Avenue, MSC 98, Brooklyn, NY 11203.

1. Only complete applications will be reviewed. A complete application consists of the attached SUNY Application for New York State Residency Status and required documentation as listed below. Return a copy of this sheet with the letters circled below as directed.

2. Photocopy all of your supporting documents and submit the entire package (application form + documents) to the Admissions Office (accepted applicants only) or to the Office of the Registrar, 450 Clarkson Avenue, MSC 98, Brooklyn, NY 11203.

Please note: The Committee on New York State Residency Status for Tuition Billing Purposes reserves the right to request any and all documentation needed to determine residency status.

All applicants must submit AT LEAST FOUR (4) POINTS worth of documents from list below. Place a circle around the alphabet letter of the items you are submitting (total must add up to a minimum of four (4) points. The Committee may request additional documentation upon review of your application.

1. Tax Returns (Submit either A or B below) (2 points)
   a. If you are an Emancipated Student (not financially dependent on another):
      • Copies of your most recent Federal and New York State income tax forms. If you have not yet filed your income tax return for the current year, submit a copy of the previous year’s return and a copy of your W-2 forms for the current year.
   b. If you are a Un-Emancipated Student (declared as a dependent on income taxes):
      • Copies of your parent’s or legal guardian’s most recent Federal and New York State income tax forms.

2. A notarized copy of your lease or deed in your name and copies of canceled checks or rent receipts covering the prior 12 months. Note: If your name is not included on lease or deed, see note below. (1 point)

3. Copies of utility bills for 12 prior consecutive months, addressed to you. Utility bills include gas and/or electric only. If utility bills are not in your name, see note below. (1 point)

4. Copy of bank statements for 12 prior consecutive months, addressed to you. (1 point)

5. A notarized copy of your NYC municipal ID/New York State Driver’s License (or New York State Non-Driver’s Identification Card) (1 point)

6. A notarized copy of your New York State Voter Registration Card. If you do not have a copy of your NYS Voter Registration Card, a printed copy can be obtained from the NYS Board of Elections online. Go to http://www.elections.state.ny.gov and click on “Look up your voter registration”. (Note that the printed copy must still be notarized.) (1 point)

7. An official copy of a transcript or an official letter on school letterhead obtained from a New York State high school showing that you attended that school for at least two complete years and your date of graduation. (Please note that your date of graduation must be within five years of the date you will begin your academic program {not the date you apply for NYS Residency}, and you must not have otherwise lost your residency since your graduation.) (4 points)

8. Proof that you are a member of the U.S. Armed Services while you are on full-time active duty in New York State; or that you are a dependent/spouse of a member of the U.S. Armed Services on active duty in New York State. (2 points)

Note: If lease/deed or utility bills are not in your name, but you are living at the address, you must also obtain a notarized letter from the person whose name appears on the lease/deed or utility bill stating that you live at that location and how long you have lived at that location. If the person listed is not a parent/guardian, you must also submit an explanation on how you cover the expenses (i.e., paying rent directly to the lease-holder, etc.) You must also still submit the documents described above in the other person’s name. All other items of proof must be in your name.
Section A: All information in Section A must be completed

College/Program: ____________________________________________

Student ID Number (if available): _____________________________ NYS County of Residence: __________________________

Last Name ____________________________________________ First Name ____________________________ Middle Name

Street _____________________________________________________ Apt. Number _________________

City _________________ State _________________ Zip _________________

Phone ____________________________ Email ____________________________

Length of time at this address (insert figures): ___________ / ____________

Years Months

If less than three years, list your prior addresses below

Address 1

Street _____________________________________________________ Apt. Number _________________

City _________________ State _________________ Zip _________________

Length of time at this address (insert figures): ___________ / ____________

Years Months

Address 2

Street _____________________________________________________ Apt. Number _________________

City _________________ State _________________ Zip _________________

Length of time at this address (insert figures): ___________ / ____________

Years Months
Address 3

Street ___________________________________________ Apt. Number ______________________

____________________________________ State ______________
City Zip ____________________________

Length of time at this address (insert figures): ________ / ________
Years Months

Local Address (if different from above)

Street ___________________________________________ Apt. Number ______________________

____________________________________ State ______________
City Zip ____________________________

Age: _____________ Date of Birth (mm/dd/yyyy): _______________ Marital Status: _______________

Citizenship: ☐ US ☐ Other (if other; visa type): __________________________

If you are a permanent resident of the U.S., list your alien registration number: A _______________________ Date Issued (mm/dd/yyyy): ______________________

Are you a first time SUNY Downstate student? ☐ Yes ☐ No If no, previous enrollment status: ☐ Undergraduate ☐ Graduate

Have you received a state award (Tuition Assistance Program, Regents Scholarship, Empire State Fellowship Challenger)? ☐ Yes ☐ No

Have you had or will you be applying for a Stafford or Direct Federal Student Loan (formerly the Guaranteed Student Loan)? ☐ Yes ☐ No

Do you have a driver’s license or state-issued ID card? ☐ Yes ☐ No If yes, in what state was your license issued? __________________________

Date Issued (mm/dd/yyyy): _______________________ Driver’s License Number: ________________________________

Do you own a car? ☐ Yes ☐ No If yes, in what state is your car registered? __________________________

License Plate Number: ___________________________ Registration Date (mm/dd/yyyy): __________________________

Are you a registered voter? ☐ Yes ☐ No If yes, in what state: __________________________

In what state did you (or your spouse) file resident taxes for 2016? __________________________ Where will you file for 2017? __________________________
Section B: If financially dependent on your parents, skip this section and have parents complete Section C

Did you or will you live in an apartment, house or building owned or leased by your parents for more than six (6) weeks during

- 2016? ☐ Yes ☐ No
- 2017? ☐ Yes ☐ No

Were you or will you be claimed as a dependent on another (e.g., your parent’s) federal or state income tax return for

- 2016? ☐ Yes ☐ No
- 2017? ☐ Yes ☐ No

Are you an emancipated minor adult student who is financially independent from parental support? ☐ Yes ☐ No

- If yes, when did you become independent? (mm/yy) __________________________

List below the sources of financial support for the last two (2) years.

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If not employed, please list your financial resources: ____________________________________________________________

Applicant’s Affirmation:

I do hereby affirm that I am a resident of New York State and that it is my intention to remain in New York State, and that all information provided on this form, and attachments thereto, is accurate, complete and true to the best of my knowledge. I understand that providing false information knowingly will disqualify me from consideration for New York State residency status.

________________________________ ________________________________ ______  ______________________________
Signature       Date (mm/dd/yyyy)

Do not forget to fill out and sign Section D, regardless of whether you must fill out section C or not.
Section C: To be completed by the person who claimed or will claim you as a dependent for income tax purposes in 2016 and 2017

Name: ________________________________   ________________________________   Relationship:  ________________________________   ________________________________

Street: ____________________________________________   Apt. Number: ____________________________________________

City: ___________________   State: _______   Zip: _________________________

Phone: ________________________________   Email: ________________________________

Length of time at this address: ________________________________   Years: ________________________________   Months: ________________________________

Citizenship:  ☐ US   ☐ Other   If other, please specify: ________________________________

Please list states in which you filed or will file resident taxes during:

2015: ________________________________   2016: ________________________________   2017: ________________________________

Affirmation:

I do hereby affirm that the above information provided is accurate, complete and true to the best of my knowledge.

______________________________   ________________________________
Signature: ________________________________   Date (mm/dd/yyyy)
Section D: Applicant’s Affirmation

The following affirmation statement must be completed and notarized before a Notary Public:

STATE OF NEW YORK   ) ss   COUNTY OF ________________________________

I, ________________________________________, the applicant herein, being duly sworn, do hereby affirm that I am a bona fide legal resident domiciled in the State of New York, and that all information provided on this form and any attachments thereto, is accurate, complete and true to the best of my knowledge.

________________________________
Signature of Applicant

Sworn to before me this ________________________________

day of ________________________________, 20_________

________________________________
Notary Public