



## 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 (matriculated students only)**. Items submitted separately will not be reviewed, and this will delay a decision on your tuition status for registration.

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 an **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

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**Address 3**

Street \_\_\_\_\_ Apt. Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

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**Local Address (if different from above)**

Street \_\_\_\_\_ Apt. Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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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 2017? \_\_\_\_\_ Where will you file for 2018? \_\_\_\_\_

## 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

2017?  Yes  No

2018?  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

2017?  Yes  No

2018?  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.

From	To	Name and Address of Employer	Hours Worked Per Week

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 2017 and 2018**

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:

2016: \_\_\_\_\_ 2017: \_\_\_\_\_ 2018: \_\_\_\_\_

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) \_\_\_\_\_

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## 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