



THE UNIVERSITY OF ARIZONA

DEPENDENT RESIDENCY CLASSIFICATION EXCEPTION

Residency Classification Office

Modern Languages Building, Room 347

P.O. Box 210067, Tucson, AZ 85721-0067

Phone Main: 520-621-3636 | Fax 520-621-3665 | REG-rc0@email.arizona.edu

For the Fall 2017 term, a completed application and supporting documentation must be received in the Modern Languages Building, Room 347 no later than 5:00pm, August 28th, 2017. Submissions received after this date will not be considered for Fall 2017.

Parent(s) and student **MUST BOTH** physically reside in Arizona prior to submitting this exception packet. Exception packets submitted prior to moving to Arizona or prior to all conditions being met will constitute an automatic denial.

Student's Name _____ Date _____

Student's ID Number _____

University of Arizona Email _____

Check One New Student Continuing Student

Semester Spring Summer Fall 20 _____

Tuition Policy for Dependent Exception

Tuition and residency classification policy for Arizona's three state universities (The University of Arizona, Arizona State University and Northern Arizona University) is set by the Arizona Board of Regents as authorized by the Arizona State Legislature. The general rule for resident classification for tuition purposes includes evidence of 12 months continued physical presence with concurrent permanent intent to be a resident of Arizona. The Arizona Board of Regents Policy on Residency can be found at: <http://www.azregents.edu/policymanual/default.aspx>.

If however, a student can demonstrate **all of the following conditions** they may be eligible for an Arizona residency classification for tuition purposes without meeting the one-year durational requirement:

- 1) the student is domiciled in Arizona, AND
- 2) one or both parent(s) of the student are domiciled in Arizona, and permanently living in Arizona prior to the first day of the semester, AND
- 3) the student's parent(s) are entitled to claim the student as a *dependent child for Federal and State tax purposes (whether or not the parent actually claims the student as a dependent child).

*Federal Definition of a Qualifying Child

- **Age:** student must be under the age of 19 at the end of the tax year, or under the age of 24 if a full-time student for at least five months of the year, or be permanently and totally disabled at any time during the year.
- **Support:** the student did not provide more than one-half of his/her own support for the year.

Attach the following documentation in support of your claim to the dependent exception:

Both parent(s) and student (attach documents to this form)

- Copies of your Arizona driver's licenses
- Copies of all your Arizona vehicle registrations/titles
- Verification of Arizona bank accounts (bank statement)
- Copies of your Arizona voter registrations

Parent(s) only (attach documents to this form)

- Arizona employment verification (if unemployed, submit copy of resignation from previous employer)
- Current Paystub
- If retired, verification of retirement (if applicable)
- Verification of transfer of household goods (moving bill)
- Proof of ownership of real property or lease
- If home ownership exists in another state, verification that home is for sale
- Statement explaining your reasons for relocating to Arizona

Student's Personal History

Age _____ If over age 19, have you been a student for at least 5 months of the previous year (Federal definition of a dependent student). Yes No

Date of birth _____ State of birth _____ Country of birth _____

Home address _____ City _____ State _____ Zip _____ Phone _____

Present address _____ City _____ State _____ Zip _____ Phone _____

U.S. citizen Yes No If no, in what country do you hold citizenship _____ Type/number of visa _____

Permanent resident alien Yes No Refugee/asylee Yes No Date of issuance of permanent resident alien status _____

Date your present stay (i.e. current stay) in Arizona began _____

Most recent year Arizona income tax filed _____ How long continuously living in Arizona _____

Where currently registered to vote (city/state) _____ Date _____

State of vehicle registration for car driven by student _____ New Renewal Date issued _____

Owner of vehicle of car driven by student _____ Relationship to student _____

State of driver's license or ID card _____ New Renewal Date issued _____

Present sources of support _____ **Last year claimed as tax dependent by parent(s)** _____

Reasons for relocating to Arizona _____

Are your parent(s) in the military Yes No State claimed for tax purposes (listed on the military monthly LES) _____

Student's Employment/Academic History

Name of high school last attended _____ Date of graduation _____

City _____ State _____

Are you presently enrolled in any college or university Yes No If yes, name and location of institution _____

I renounce all claims to residency in any state other than Arizona. I further declare Arizona to be my state of legal domicile, not only for residency status for tuition purposes, but for all other purposes as well. All statements, information, and evidence presented are true and complete. I understand that if I provide false information, make a material misrepresentation or omission in connection with this petition for change of residency or make any effort to fraudulently obtain Arizona residency for tuition purposes for the above named student, it will jeopardize the student's case for residency and subject him/her to disciplinary action such as: dismissal from the University, repayment of tuition fraudulently waived, repayment of financial aid fraudulently obtained, and may result in civil and criminal liability. I hereby grant permission for the University of Arizona representatives to verify any supporting evidence submitted with this Dependent Exception.

Signature of student

Date

I certify that _____ is eligible to be claimed as a dependent for State and Federal tax purposes. I further
Student Name
Certify that the dependent and myself are currently domiciled in Arizona and each of the foregoing statements is a true and correct statement of fact.

Signature of Father

Date

Signature of Mother

Date

Sworn to and subscribed before me this _____ day of _____ 20 _____

Signature of Notary Public

Notary Seal

Parent's History

Relationship to student.....	<input type="checkbox"/> Father <input type="checkbox"/> Stepfather <input type="checkbox"/> Guardian	<input type="checkbox"/> Mother <input type="checkbox"/> Stepmother <input type="checkbox"/> Guardian
Name.....	_____	_____
Permanent address.....	_____	_____
Last Previous address.....	_____	_____
Does he/she claim Arizona domicile.....	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

If yes and he/she is not living in Arizona then provide a statement which supports the claim to Arizona domicile.

Present address.....	_____	_____
U.S. citizen.....	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

IMPORTANT: If a parent/guardian is not a U.S. citizen, provide a copy of their permanent resident card or visa.

Permanent resident.....	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
What period of time has he/she resided in Arizona.....	Inclusive dates _____	Inclusive dates _____
Employed in Arizona.....	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Retired	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Retired
Occupation.....	_____	_____
Employer.....	_____	_____
Employer's address.....	_____	_____
Does he/she own a home in Arizona.....	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Home ownership in another state.....	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where? _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of Arizona home purchase or lease.....	_____	_____
Registered to vote--when/where last voted.....	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No
Vehicle registration.....	State _____ Date issued _____	State _____ Date issued _____
Driver's license.....	State _____ Date issued _____	State _____ Date issued _____
Last 2 years income tax filed.....	Year ____ State ____ / Year ____ State ____	Year ____ State ____ / Year ____ State ____
Are BIOLOGICAL parents deceased.....	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown

Are your parents divorced or legally separated? Divorced Legally Separated N/A

If parents are divorced or legally separated:

When? _____

Where? _____

Name of Court (provide legal documents): _____

Which parent is entitled to claim student as an income tax exemption on the most recent Federal tax return? Father Mother both

Has a court order been issued assigning student to the custody of a person other than a parent. If yes, **provide legal court document.** Yes No

If yes, to whom was guardianship granted? _____

Why was the guardianship created? _____

If yes, when, where, and by what court _____

If yes, who claims student as an income tax exemption/deduction _____