

**The College at Brockport, State University of New York  
Application for New York State Residency Status  
for Tuition Billing Purposes**

**Deadline for Submission:** The application *must* be received by Office of Student Accounts no later than the last day of the semester late add period. Failure to submit an application by the deadline will result in full liability for tuition at the non-resident tuition rate. Applications submitted after the deadline may be considered for the following term. Supporting documentation must be for a period of 12 months or more prior to the start of the term for which you are applying for NYS residency status.

**Application and Copies of Required Documents should be mailed to:** The Office of Student Accounts, Attn: Residency Officer, 350 New Campus Drive, Brockport, NY 14420-2938. For assistance, please call (585) 395-2473.

*Please refer to page six for detailed application guidelines*

**Part I (must be completed by ALL applicants)**

1. Term for which you are applying for NYS Residency (please indicate term and year, e.g., Fall 2012)

Fall \_\_\_\_\_ Winter \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_

2. Name: \_\_\_\_\_  
Last First MI

3. Brockport E-Mail Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

4. Brockport Student ID #: 800 \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_

5. Are you a U.S. Citizen?  Yes  No  
 Are you a Naturalized Citizen of the U.S.?  Yes  No *(Attach copy of your certificate, if applicable)*  
 If you are not a citizen are you a permanent resident alien?  Yes  No  
 If yes, registration number A# \_\_\_\_\_ *(Attach copy of your card, if applicable)*  
 Are you here on a visa?  Yes  No  
 If yes, list visa type \_\_\_\_\_ Expiration Date: \_\_\_\_\_ *(Attach copy of your card, if applicable)*

6. Did you attend a New York high school for two or more years and graduate from that school within the last five years?  Yes  No  
 If yes, high school name & location: \_\_\_\_\_  
 Period of attendance: From: \_\_\_\_\_ To: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
*(Note: We may require a copy of your high school transcript if you have not already remitted it)*

7. Do you have a GED issued by New York State:  Yes  No If yes, date issued: \_\_\_\_\_

- A. If you answered **YES to QUESTION 6 or 7**, and **YOU ARE A U.S. CITIZEN or PERMANENT RESIDENT ALIEN**, please **PROCEED TO PART III** of this application and date and sign the Affirmation. You must complete and sign this section in front of a Notary Public. You do not need to complete any further sections of this form.
- B. If you answered **YES to QUESTION 6 or 7**, 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, please **PROCEED TO PART III** of this application date and sign the Affirmation. **YOU MUST ALSO COMPLETE Appendix A (Student Affidavit of Intent To Legalize Immigration Status)** before a Notary Public in order for your application to be considered.

**If neither "A" or "B" (above) applies to you, please proceed to Part II of this application.**

**Part II**

Section 1 must be completed by the student.

Section 2 must be completed if you are an INDEPENDENT student.

Section 3 must be completed if someone other than you or your spouse claims you as a DEPENDENT for tax purposes.

**SECTION 1 Must be completed by the student applicant.**

Legal Address:

\_\_\_\_\_ Street \_\_\_\_\_

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

County of Residence: \_\_\_\_\_ *(Attach copy of your signed lease, deed or property tax bill)*

Length of time at this address: \_\_\_\_\_ *Note: If less than three years, list your prior address(es) below.*  
Years / Months

From	To	Street	City	State
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Local address and phone number (if different than above):

Do you have a driver's license or state-issued non-driver's identification card?  Yes  No

If yes, in what state was it issued? \_\_\_\_\_ Date issued: \_\_\_\_\_ *(Attach copy of driver's license, permit, etc.)*

Do you own a vehicle?  Yes  No If yes, in what state is your vehicle registered? \_\_\_\_\_

Date issued: \_\_\_\_\_ *(Attach copy of vehicle registration)*

Are you a registered voter?  Yes  No If yes, state of registration: \_\_\_\_\_ Registration date: \_\_\_\_\_ *(Attach copy of voter registration card)*

**SECTION 2 Must be completed if you are claiming INDEPENDENT status. If you are financially dependent on your parents, e.g., if they claim you as a dependent on their federal taxes, proceed to Section 3.**

In what state did you (or your spouse) file resident taxes for the past two years? \_\_\_\_\_

In what state will you (or your spouse) file your resident taxes this year? \_\_\_\_\_ *(Attach a signed copy of your most recent Federal and State Income tax returns)*

Did you or will you live in an apartment, house or building owned by your parents for more than six weeks during the last two years & current year? Year 20\_\_\_\_  Yes  No Year 20\_\_\_\_  Yes  No Year 20 \_\_\_\_  Yes  No

Were you or will you be claimed as a dependent on your parents federal income tax return for the prior and current years?  
Prior Year 20\_\_\_\_  Yes  No Current Year 20\_\_\_\_  Yes  No

*(If you are 26 years old or younger you MUST attach a signed copy of your parent's most recent Federal and State Income tax returns)*

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

If yes, when did you become independent? \_\_\_\_\_ / \_\_\_\_\_  
Month Year

Do you rent or own residential property in New York?  Rent  Own *(Attach copy of your signed lease, deed or property tax bill)*

Amount of financial support provided to you by parents or guardians during the prior and current years:

Prior Year: 20 \_\_\_\_ \$ \_\_\_\_\_ Current Year: 20 \_\_\_\_ \$ \_\_\_\_\_

List below your sources of financial support. The **total must equal or exceed** the annual cost of attendance for the year in which you are applying for New York state residency status. The current cost of attendance may be found at: [http://www.brockport.edu/finaid/cost\\_of\\_attendance.html](http://www.brockport.edu/finaid/cost_of_attendance.html). The College may request additional documentation to support the information you provide.

\$ Amount per year	Source of support (wages, savings, student loans, unemployment, public assistance)
_____	_____
_____	_____
_____	_____

**SECTION 3 Must be completed by the CUSTODIAL PARENT or NON-CUSTODIAL PARENT with whom the student resides or who claims the student as a dependent for income tax purposes. If you are an INDEPENDENT student and completed Section 2, proceed to Part C.**

Name: \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Permanent Address: \_\_\_\_\_ (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip)

Length of Time at this Address: \_\_\_\_\_ Months / \_\_\_\_\_ Years

5. Are you a U.S. Citizen?  Yes  No

If you are not a citizen are you a permanent resident alien?  Yes  No

If yes, registration number A# \_\_\_\_\_ *(Attach copy of your card, if applicable)*

Are you here on a visa?  Yes  No

If yes, list visa type \_\_\_\_\_ Expiration Date: \_\_\_\_\_ *(Attach copy of your card, if applicable)*

Please list states in which you filed or will file resident taxes during the last two years; and current year:

Year 20 \_\_\_\_\_ State: \_\_\_\_\_ Year 20 \_\_\_\_\_ State: \_\_\_\_\_ Current Year 20 \_\_\_\_\_ State: \_\_\_\_\_

*(Attach a signed copy of your most recent Federal and State Income tax returns)*

Do you have a driver's license or state-issued non-driver's identification card?  Yes  No

If yes, in what state was it issued? \_\_\_\_\_ Date issued: \_\_\_\_\_ *(Attach copy of your license, permit, etc.)*

Do you own a vehicle?  Yes  No If yes, in what state is your vehicle registered? \_\_\_\_\_ Date issued: \_\_\_\_\_ *(Attach a copy of your registration)*

**Affirmation for SECTION 3 ONLY – The following statement must completed by the parent or custodial parent and notarized before a Notary Public.**

I hereby certify that the above applicant is applying with my knowledge for New York State residency status at The College at Brockport.

STATE OF NEW YORK, COUNTY OF \_\_\_\_\_, I, \_\_\_\_\_, do hereby affirm that all the information provided on this form and any attachments thereto, is accurate, complete and true to the best of my knowledge.

\_\_\_\_\_  
(Signature of Parent or Custodial Parent)

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
(Notary Public)

Affix Notary Stamp here

**Part III – Applicant's Affirmation (must be completed by ALL applicants)**

STATE OF NEW YORK, 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 the information provided on this form and any 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 resident status for tuition billing purposes.

Signature of Applicant: \_\_\_\_\_

Sworn to before me this  
\_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_  
\_\_\_\_\_  
(Notary Public)

Affix Notary Stamp here

**Office Use Only**

**Application Denied Approved** By: \_\_\_\_\_  
Signature of College Residency Officer

Effective Term: \_\_\_\_\_ Date Approved/Denied: \_\_\_\_\_

**Decision Letter mailed to student** by: \_\_\_\_\_ Date: \_\_\_\_\_

**If applicable, date copy of U.S. Permanent Resident Card, U.S. Certificate of Citizenship/  
Naturalization or foreign visa provided to:**

International Student Services Office \_\_\_\_\_ Registration and Records \_\_\_\_\_

**Banner Updates:**

SFAREGS adjusted by: \_\_\_\_\_ Date: \_\_\_\_\_

TSAAREV comment entered by: \_\_\_\_\_ Date: \_\_\_\_\_

**Residency Spreadsheet updated:** \_\_\_\_\_ **Financial Aid Notified:** \_\_\_\_\_  
(if applicable)

Revised 12/13/11

**Appendix A – Student Affidavit of Intent to Legalize Immigration Status – to be completed by Students who do not have legal immigration status.**

STATE OF NEW YORK, COUNTY OF \_\_\_\_\_.

I \_\_\_\_\_, being duly sworn, deposes and says that he/she does not currently  
(Student's name - print)  
have 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 before me this  
\_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
(Notary Public)

Affix Notary Stamp here

## **New York State Residency Status for Tuition Billing Purposes - Application Guidelines**

### **Statement of SUNY Board of Trustees Policy:**

A person whose *domicile* has been in the State of New York for a period of at least one year immediately preceding the time of registration for any period of attendance shall be a New York resident for the purpose of determining the tuition rate payable for such period. All other persons shall be presumed to be out-of-state residents for such purpose, unless domiciliary status is demonstrated in accordance with guidelines adopted by the Chancellor or designee.

### **Residency Applications:**

Applications for New York State Residency Status for Tuition Billing Purposes should be completed by

- a. students admitted to the College as out-of-state students who wish to appeal that initial determination,
- b. students previously classified as out-of-state students and who wish to apply for a change in that classification (e.g., after maintaining a domicile in New York for at least 12 months, after obtaining a qualifying visa classification, etc.), and
- c. students for whom the College seeks to verify a claim of residency.

**NOTE: any student who fails to complete the residency application, including the submission of all supporting documentation, after being requested to do so will be charged the non-resident (out-of-state tuition) rate.**

### **Definition of Domicile:**

- a) For unemancipated students, the domicile is that of his or her parents or other legal guardian. An unemancipated student of divorced or legally separated parents will acquire a New York State domicile if the custodial parent is a New York resident, or if the student resides with a noncustodial parent and the student intends to continue to reside with that parent throughout his or her attendance at the University.
- b) For emancipated students, a domicile is a fixed, permanent home to, which the student intends to return whenever absent. A person may have many residences but only one domicile. A domicile is retained until it is abandoned and another established. One **does not** acquire a New York State domicile by being physically present in New York for the sole purpose of attending the University, or by simply being physically present in New York for a period of twelve months.
- c) College dormitories are not considered a permanent domicile; independent students residing in the residency halls will not be considered for New York State residency status.

### **Exceptions to the Domicile Rule:**

- a) Members of the U.S. Armed Forces who document that they are on full-time active duty and are stationed in New York shall be charged in-state tuition regardless of the actual location of their domicile. Spouses and dependents shall also be charged in-state tuition.
- b) Dependents of a parent or legal guardian who is a member of the U.S. Armed Forces who is stationed out-of-state shall be charged in-state tuition provided that the parent or legal guardian submits proof of a New York State domicile – referred to as a “Home of Record.” Such records are on file at the person’s military base.

### **Domicile and Immigrant/Non-Immigrant Aliens:**

Immigrant aliens (Permanent Residents), refugees and asylees, including those with pending applications, may establish in-state residence in accordance with these policies. Certain undocumented aliens may be eligible for the resident tuition rate under these policies. Non-immigrant aliens with the following certain types of visa classifications may also establish in-state residence.

### **Factors Relevant to Domicile and Emancipation:**

**A. Domicile:** Proof of a New York State domicile is demonstrated by documents which support an applicant’s contention that his or her permanent home is located in New York. For unemancipated students, the proof shall relate to the permanent home of the parents or legal guardian. Factors relevant to a claim of domicile include, but are not limited to:

1. New York State driver’s license (or non-driver ID card) and vehicle registration.
2. New York State voter registration.
3. New York State and Federal income tax returns.
4. Duration of the student’s physical presence in New York.
5. State of residency of the student’s family (i.e., parents, spouse, or children).
6. Proof of ownership of New York State real property or 12-month residential rental lease.
7. New York State bank accounts.

**B. Emancipation:** A student whose parents or legal guardian reside out-of-state and who is claiming emancipation must present evidence of both emancipation and a New York State domicile. Such proof must include documentation demonstrating the student’s financial independence. Students under the age of 22 must provide evidence of one year of independent living in order to be considered emancipated. Factors relevant to a claim of emancipation include, but are not limited to:

1. Employment on a full-time or part-time basis in New York.
2. Sources and extent of financial support from parents or guardians.
3. Sources and extent of other income.
4. Parents’ Federal and State income tax forms which do not claim the student as a dependent (if the student continues to receive financial support, however, the student shall not be considered emancipated).
5. Student’s place of residence during the summer or other academic term recess.
6. Student’s status as financially independent for purposes of Federal/State financial aid.
7. Independent filing by the student of Federal/State income tax returns; other assets and liabilities.

Emancipated students are totally responsible for paying all of their educational costs. The amount of income claimed by the student must be in excess of educational expenses, including those expenses associated with living in non-campus housing. The term income includes any financial aid awarded directly to the student with the exception of parental loans. The student should not have any joint or custodial accounts with the parent or legal guardian, and any income claimed must be accompanied by source documentation (tax returns, Form 1099, bank statements, trust documents, etc.).