



DEPENDENT RESIDENCY CLASSIFICATION EXCEPTION

Residency Classification Office
Administration Building Room 210
P.O. Box 210066, Tucson, AZ 85721-0066
Phone: 520-621-3113
Email: reg-rco@arizona.edu

To receive a decision for this exception request prior to the first day of classes, you must submit this form and all appropriate documentation by the deadline as notated on our website. Additional information about exception deadlines can be found by navigating to the Forms and Exceptions webpage at: <https://www.registrar.arizona.edu/residency>. Please email the form and documentation to reg-rco@arizona.edu

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 name: _____ Date: _____

Student 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:

<https://www.azregents.edu/policy-manual>.

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:** The 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)	Parent(s) only (attach documents to this form)
<input type="checkbox"/> Copies of your Arizona driver’s licenses <input type="checkbox"/> Copies of all your Arizona vehicle registrations/titles <input type="checkbox"/> Verification of Arizona bank accounts (bank statement) <input type="checkbox"/> Copies of your Arizona voter registrations Parent(s) Only: <input type="checkbox"/> USPS address change form <input type="checkbox"/> If a parent/guardian is not a U.S. citizen, provide a copy of their permanent resident card or visa. <input type="checkbox"/> Younger sibling(s) school enrollment	<input type="checkbox"/> Arizona employment verification (if unemployed, submit copy of resignation from previous employer) <input type="checkbox"/> Current paystub <input type="checkbox"/> If retired, verification of retirement (if applicable) <input type="checkbox"/> Verification of transfer of household goods (moving bill) <input type="checkbox"/> Proof of ownership of real property or lease <input type="checkbox"/> If home ownership exists in another state, verification that home is for sale <input type="checkbox"/> 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 code: _____ **Home phone:** _____

Present address: _____ **City:** _____ **State:** _____
ZIP code: _____ **Present 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 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 them 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.

Student signature: _____ **Date:** _____

I certify that _____ is eligible to be claimed as a dependent for state and federal tax purposes.
(Student Name)

I further certify that the dependent and myself are currently domiciled in Arizona and each of the foregoing statements is true and correct statement of fact.

Parent 1 signature: _____ **Date:** _____

Parent 2 signature: _____ **Date:** _____

Parent(s) History

Relationship to student:

Parent 1 Stepparent Guardian **Name:** _____

Permanent address: _____

Last previous address: _____

Does the parent/guardian claim Arizona domicile Yes No

U.S. Citizen Yes No **Permanent resident** Yes No

What period of time have they resided in Arizona: _____

Employed in Arizona Yes No Retired

Occupation: _____

Employer: _____

Employer address: _____

Do they own a home in Arizona Yes No

Home ownership in another state Yes No *if yes, Where:* _____

Date of Arizona home purchase or lease **Date:** _____

Registered to vote Yes No *if yes, When:* _____ **Where:** _____

Vehicle registration **State:** _____ **Date Issued:** _____

Driver's license **State:** _____ **Date Issued:** _____

Last 2 years income tax filled **Year:** _____ **State:** _____ **Year:** _____ **State:** _____

Are the student's BIOLOGICAL parents deceased Yes No Unknown

Relationship to student:

Parent 2 Stepparent Guardian **Name:** _____

Permanent address: _____

Last previous address: _____

Does the parent/guardian claim Arizona domicile Yes No

U.S. Citizen Yes No **Permanent resident** Yes No

What period of time have they resided in Arizona: _____

Employed in Arizona Yes No Retired

Occupation: _____

Employer: _____

Employer address: _____

Do they own a home in Arizona Yes No

Home ownership in another state Yes No *if yes, Where:* _____

Date of Arizona home purchase or lease **Date:** _____

Registered to vote Yes No *if yes, When:* _____ **Where:** _____

Vehicle registration **State:** _____ **Date Issued:** _____

Driver's license **State:** _____ **Date Issued:** _____

Last 2 years income tax filled **Year:** _____ **State:** _____ **Year:** _____ **State:** _____

Are the student's BIOLOGICAL parents deceased Yes No Unknown

Are your parents divorced or legally separated Divorced 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? Parent 1 Parent 2 Both

Has a court order been issued assigning student to the custody of a person other than a parent? Yes No

If yes, please provide legal court documents.

If yes, to whom was guardianship granted? _____

Why was guardianship created? _____

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

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