

CONTINUING STUDENT PETITION TO CHANGE RESIDENCY CLASSIFICATION



Residency Classification Office
Administration Building Room 210
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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 page on: <https://www.registrar.arizona.edu/residency>. Please email the form and documentation to reg-rco@arizona.edu

This petition is for financially independent students (those not claimed as a dependent) who are currently enrolled and have completed at least one term at an Arizona educational institution.

Students name: _____ Date: _____

Students ID number: _____

University of Arizona email: _____

Check one:	New student	Continuing Student
Semester	Spring	Summer
	Fall	20_____

Tuition Policy for Continuing Financially Independent Students

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>.

The mere presence of a person in this state does not, by itself, constitute domicile for tuition purposes. If however, a continuing student's status changes (common changes are marriage to an Arizona resident or the dependent student's parent(s), who are entitled to claim the student as dependent child for federal and state tax purposes changes their domicile to Arizona) they may be eligible for Arizona residency classification for tuition purposes under the **Dependent Classification Exception Form**. Evidence must be clear and convincing. The general residency classification under the Continuing Student Petition requirements are as follows:

- The student must prove continuous physical presence in Arizona for at least 12 months prior to the semester of application.
- Student must provide evidence of simultaneous acts of intent to make Arizona the student's permanent home and abandonment of old domicile. Acts occurring less than one year before the last day of registration may not be relied upon as evidence of intent to establish domicile in Arizona.
- Objective evidence of financial independence. Indicators of financial independence include 1) Place of employment and proof of earnings 2) Other sources of support 3) Proof of filing an Arizona state income tax return 4) Residence claimed on federal income tax returns of applicant and/or parents 5) Veteran status 6) Whether claimed by a parent or any other individual for **one year** immediately preceding the request for residency classification.
- The student's presence must be coupled with clear and convincing evidence of intent to establish a domicile in Arizona beyond the circumstance of being a student; overcoming the ABOR directed presumption that no emancipated person has established a domicile in Arizona while attending any educational institution in Arizona as a full-time student.

Attach the following documents to support your claim of Arizona domicile with intent to make Arizona your permanent home:

Leases or home ownership
Arizona driver's license (or Arizona ID card **if not a driver**)
Arizona vehicle registration
Arizona voter registration card
State and Federal Tax Forms for the last year
Full Bank statements for the last 12 months
Vehicle Insurance Policy

Private loan documents, if applicable
Pay stub (only most recent)
W2 for previous year
Utility Bill (most recent bill)
Permanent Resident Card or Visa, if applicable
Employment Authorization Document Card, if applicable
Any other documents which you feel would support your claim to Arizona residency

Student's Personal History

Age: _____ Date of Birth: _____ State of Birth: _____ Country of birth: _____
Home Address: _____ City: _____ State: _____ ZIP: _____ Cell Phone: _____
Present Address: _____ City: _____ State: _____ ZIP: _____ Cell 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: _____
Deferred Action for Childhood Arrivals (DACA) Yes No Valid from Date: _____ Expires: _____

Physical Presence

Date your present stay (i.e. current stay) in Arizona began: _____
How long continuously living in Arizona: _____
City/State or country of residence prior to Arizona: _____ Inclusive Date: _____
Have you definitely abandoned your former domicile Yes No If yes, when: _____
Do you own real property in Arizona: Yes No If yes, what type: _____ Date of purchase: _____
Are there co-owners of the property Yes No If yes, relationship to student: _____
List all addresses where you resided for the last 24 months, including your present address

Inclusive dates (Months/Year)	Address	City/State	Rent or Own	
			Rent	Own
			Rent	Own
			Rent	Own

Have you been out of the state of Arizona more than 3 consecutive weeks in the past 12 months Yes No

If yes, please provide dates and reasons:

Intent

Name of high school last attended: _____ Graduation date: _____
Location of high school -City: _____ State: _____
List all colleges/universities to which applied and all attended (*use additional paper if necessary*)

Name of College/University	College/University City and State	Accepted		Dates attended
		Yes	No	
		Yes	No	
		Yes	No	
		Yes	No	

Current field of study: _____ Expected date of Graduation: _____
Where currently registered to vote (City/State): _____ Date: _____
Where last voted (City/State): _____ Date: _____
Where previously registered to voted (City/State): _____ Date: _____
Owner of vehicle driven by student: _____ Relationship to Student: _____
State of vehicle registration: _____ New Renewal Date Issued: _____
State of driver's license of ID card: _____ New Renewal Date Issued: _____
What state of Selective Service registration Date registered: _____ State registered: _____

Do you maintain any professional license (real estate, nursing, insurance, etc.) in Arizona or another state:

List memberships in any clubs, churches or professional organizations:

State your reasons for relocating to Arizona and your current intent (*use additional paper if necessary*) Must be completed

Financial Independence

Do your parents claim you as a dependent on income tax returns Yes No If no, when was the last year: _____

Do you receive financial support from parent(s) Yes No

If yes, what is their name Parent 1: _____ Parent 2: _____

Do your parents carry you on their vehicle insurance Yes No

If yes, explain:

Bank accounts/assets

	Name of Institution	Location	Date Open/Closed
Checking:	_____	_____	_____
Savings:	_____	_____	_____
Money market/trusts:	_____	_____	_____

How much financial assistance did you receive from parents during the academic year (Fall/Spring/Summer)

Fall year: _____ Amount: _____

Spring year: _____ Amount: _____

Summer year: _____ Amount: _____

Are you receiving financial assistance through a Parent Plus Loan? If yes, please indicate the amount

Fall year: _____ Amount: _____

Spring year: _____ Amount: _____

Summer year: _____ Amount: _____

Employment History

Employer	City/State	Inclusive Dates	Part-Time/Full-Time	Amount Earned
			PT FT	
			PT FT	
			PT FT	
			PT FT	
			PT FT	

List the states in which you filed a **RESIDENT STATE INCOME TAX RETURN** for the past 3 years

Year	State	Address on Tax Form	Claimed as a dependent
			Yes No
			Yes No
			Yes No

List the filing addresses in which you filed **FEDERAL INCOME TAX RETURNS** for the past 3 years

Year	Address on Tax Form	Claimed as a dependent
		Yes No
		Yes No
		Yes No

Miscellaneous

If you are currently in the military or have been discharged within the last 12 months, please complete the following:

Date of entry: _____ Date of separation: _____ Current duty station: _____
State claimed for tax purposes (listed on LES): _____ Year and state of last state tax return: _____

If you are married, please complete the following:

Spouse name: _____ Address: _____

Spouse employer: _____ Address: _____

Date and place of marriage: _____

Is spouse domiciled in Arizona Yes No If no, please explain

The information provided in this petition is true. I understand that if I am found to have made a false or misleading statement in this petition, I may be subject to discipline including dismissal from the University of Arizona.

Student's Signature

Date