



DOMICILE AFFIDAVIT

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

This form is ONLY for first-time students during their first semester at the University of Arizona or former students returning after an absence. Please email the form and documentation to reg-rco@arizona.edu

Student Name: _____ Student ID Number: _____

Semester for which domicile affidavit is intended Spring Summer Fall Year: _____

Part 1: Personal History

A. Age _____ Date of Birth _____ State of Birth _____ Country of Birth _____

B. Home address _____ City _____ State _____ ZIP _____ Phone _____

C. Present address _____ City _____ State _____ ZIP _____ Phone _____

D. 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 Issuance date of permanent resident alien status _____

(if yes, please provide a copy of your permanent resident card)

Deferred Action for Childhood Arrivals (DACA) Yes No If yes, then attach a copy of your EAD card to this affidavit.

Employment Authorization Document (EAD) valid from date _____ (EAD) expiration date _____

If no EAD then attach a copy of your approved I-797 Notice of Action form Valid from _____ Until _____

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

F. Official University of Arizona email address _____

Part 2: Domicile

A. Do you consider yourself domiciled in Arizona (i.e. are you an Arizona Resident)? Yes No

B. If you consider yourself domiciled in Arizona, carefully complete this entire form

If you do **NOT** consider yourself domiciled in Arizona, present this form after completing Part 1 and Part 2 and signing at the bottom of Part 5 on the fifth page

Part 3: Employment/Academic History

A. Name of high school last attended _____ City _____ State _____ Date of graduation _____

B. Chronological record of education and employment activities since high school or past 24 months: **Leave no significant gaps unexplained.**

Employment (Start with present or most recent employer)

Inclusive Dates with Month & Year	Name of Employer/Company Name	City & State

College and Universities Attended (Start with present or most recent Institution)

Inclusive Dates with Month & Year	Name of College/University	City & State

Are you presently enrolled in any college or university? Yes No

If yes, give the name and location of the institution _____ City _____ State _____

Part 4: Personal Data

- A. Most recent year Arizona income tax filed _____
- B. Where did you last vote? (City & State) _____
Date you last voted _____
- C. Where are you currently registered to vote? _____
- D. Place and date of immediately previous voter registration _____
- E. How long have you been continuously living in Arizona? _____
- F. City and state or country of residence prior to Arizona
Inclusive dates of prior residence _____
- G. Registration of vehicle operated by student _____

- H. Driver's license or Arizona ID card _____

Student

 Owner: _____
 State: _____
 Date Issued: _____
 New Renewal
 State: _____
 Date Issued: _____
 New Renewal

Spouse (if applicable)

 Owner: _____
 State: _____
 Date Issued: _____
 New Renewal
 State: _____
 Date Issued: _____
 New Renewal

Student Information

- A. Have you been out of Arizona during the past 12 months? Yes No Please explain dates and reasons: _____
- B. What are your present sources of financial support? _____
- C. If entirely self-supporting, for how long have you supported yourself? _____ Last year claimed as tax dependent by parent(s) _____
- D. Reasons for relocating to Arizona _____
- E. Are you a veteran? Yes No
Date of entry _____ Date of separation _____ Branch of service _____ Home of Record _____
- F. Are you, your spouse, or parent(s) in the military? Yes No State claimed for tax purposes (listed on the military monthly LES) _____

***Under Arizona Law, the residency of the student's spouse may have bearing on the residency status of the student, so this information may be helpful.**

Part 5: Family History (if student is claimed by someone else for tax purposes within the last year or is under the age of 18)

- A. Are student's BIOLOGICAL Parent 1 deceased? Yes No Unknown
- B. Are student's BIOLOGICAL Parent 2 deceased? Yes No Unknown
- C. If parents are divorced, to whom did the court assign custody of the minor student? _____
(if not applicable, skip questions C-K)
- D. If so, when, where, and by what court? _____
- E. Which parent claimed the student as an income tax exemption/deduction on the recent federal tax return? _____
- F. Has a court order been issued assigning student to the custody of a person other than a parent (or legally emancipating the student)? Yes No
- G. If yes, why was this done? _____
- H. If so, to whom? _____
- I. If so, when, where, and by what court? _____
- J. If so, who claims the student as an income tax exemption/deduction? _____
- K. If so, where do the biological parents live? _____

Parent 1

Parent 2

L. Name:	_____	_____
M. relationship to student:	_____	_____
N. Does the parent(s) claim Arizona domicile?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
O. Permanent address	_____	_____
P. Present address	_____	_____
Q. U.S. Citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
R. Permanent resident Card holder?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>(if yes, please provide a copy of your permanent resident card)</i>		
S. What period of time have they resided in AZ? Dates:	_____	_____
T. 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
U. Occupation	_____	_____
V. Employer	_____	_____
W. Employer's address	_____	_____
X. Last previous home address	_____	_____
Y. Do they own a home in AZ?	<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	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of Arizona home purchase or lease	_____	_____
Z. Registered to vote?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
State last voted?	State: _____	State: _____
AA. Vehicle registration	State: _____ Date Issued: _____	State: _____ Date Issued: _____
BB. Driver's license	State: _____ Date Issued: _____	State: _____ Date Issued: _____
CC. Last 2 years income tax filed	Year 1: _____ State: _____	Year 1: _____ State: _____
	Year 2: _____ State: _____	Year 2: _____ State: _____

I certify the information entered on this form has been examined by me and to the best of my knowledge is current and complete. I understand false or misleading statements concerning domicile may lead to dismissal. (If the student is less than 18 years of age, the parent or legal guardian must also sign.)

_____	_____	_____	_____
Student's Signature	Date	Parent 1	Date
		Parent 2	Date