#### All Students must complete the CUNY Residency Form with the appropriate documentation.

Please choose one of the following if applicable:

a) If you are U.S. Citizen: b) If you are Undocumented please submit:	<ul> <li>[ ] Follow the instructions selecting items from the list below.</li> <li>[ ] NYS High School Diploma (only applies if you attended and completed high school in New York</li> </ul>
c) If you are a Permanent Resident please submit: d) If you are filing for Permanent Residence or Citizenship please submit:	[ ] Permanent Resident (green) card OR [ ] Copy of I-551 stamp [ ] Affidavit of Intent to Legalize (Included in Residency Application): or Official Government receipt of application (I-485 form); or work authorization card
e) Veterans	[ ] Submit a copy of DD 214.
	Assistance Program (TAP) may be subject to the "Ability to Benefit" requirement if the tates. Please see the New York State Higher Education Services Corporation (HES)
Note: This documentation must be submitted in add	ition to proof of New York State residency, please see below.
Instructions: The student must submit two of items "a' preceding the first day of classes. Documents in the sam acceptable provided that they show the student living at	'through "n" (Note: All items must document residency for the 12 month period immediately ne category covering the first and last months of the previous twelve month period are the same address).
Lease, deed or rent registration form (used for rent state student or parent of the student with the same surnam	abilized apartments) signed by the landlord, which is either a public or private agency, and the
b. Letter showing eligibility or disbursement of Social S the 12-month period immediately preceding the first	Security or New York City Public Assistance with the student's New York address covering day of classes and including the student's name,
c. Copies of the most recent complete Federal and New New York State form 4506 requesting Federal and St party in question has in fact filed a tax return from the	York State tax returns and the corresponding W-2 form. Responses to Federal form 4506 and tate tax information is acceptable if the Federal and State governments acknowledge that the e address noted,
d. A valid New York State driver's license or a "non-dr name, showing the date of issuance at least one year p	iver license" issued by the New York State Department of Motor Vehicles with the student's prior to the first day of classes,
e. IDNYC New York City municipal identification card	, showing the date of issuance at least one year prior to the first day of classes,
f. Homeowner's or renter's insurance policy with the str	udent's name listed as insured,
g. Automobile registration with the student's name liste	d,
h. Automobile insurance certificate with the student's n	ame listed as insured,
i. Voter registration certificate or card with the student's	s name,
j. Bills for telephone, utility, cable TV or other home ser services provided to the student covering a period of I	rvices, in the student's name, or other evidence of telephone, utility, cable TV or other home 2 months,
k. Monthly bank or credit card statements, with the stud	ent's name, covering a period of 12 months (dollar amounts may be blocked out),
1. Attendance as a juror in New York State with the stud	lent's name,
appear on the lease, the "Alternate Lease Statement" both the person whose name appears on the lease/cor	vidual and is not a public or private agency) and the student. If the student's name does not may be substituted. The "Alternate Lease Statement" must be completed and notarized by stract and the student. The person whose name appears on the lease/contract must also submit lls) of residency at his/her current address for the previous 12 months,
<ul> <li>n. Postmarked mail addressed to a student at a New Yor acceptable)</li> </ul>	k address at least 12 months immediately preceding the first day of classes (a P.O Box is not

In addition to the items indicated above, the college may at its discretion consider additional documentation from a student if it believes that an

accurate residency determination may be rendered through the additional documentation.



#### **CUNY RESIDENCY FORM (Part A)**

Semester:

1. Last Name	First Name	Middle Initial	
2. Emplid	Date of Birth	Phone	
3. Are you a U.S. citizer	n? Yes NoAre you a permanent	resident alien? YesNo	
Are you here on a visa?	Yes No Visa type: Expir	ration Date:	
4. Did you attend a New school?	York high school for two or more years,	, and graduate from that high	
Yes No If yes,	high school name and location		
Period of Attendance	Gradua	tion Date	
5. If you answered "yes" Yes No	" to item 4, did you apply to CUNY with	in 5 years of your graduation date	?
6. Do you have a GED i	ssued by NYS? YesNo " Date Iss	sued:	
complete any further section lawful immigration status	puestions 4 and 5, or to question 6, and are a lon of this form. If you answered "yes" to quest but have filed an application to legalize your nust complete Part B ofthis Residency Form (	stions 4 and 5, or to question 6, and do immigration status or will file such a	o not currently have
	uestion 4 and are a U.S. citizen, permanent re Part C of this Residency Form.	sident alien, or have a visa type eligib	ole to qualify for resident
Please refer to the instructi	ions to complete this form for a comprehensiv	ve list of eligible visa	
	To Be Completed by	y All Students	
I certify that all information to the best of my knowled;	on provided and all statements made in all sec ge.	tions of this Residency Form are true	and correct
the City University of New	de false information or withhold relevant info w York may revoke its determination of in-standard semester or session that I have attended under tion.	ate residency, and that I will owe non	ı-resident tuition
STUDENT SIGNATURE		DATE	_
• The college will not rev	iew any residency determination unless the i	request for the review is made, and	

all the required documentation is submitted, during the semester for which resident tuition is being sought.

• If the College determines that you are non-resident, you may appeal by notifying the Registrar's Office in writing

within ten days of the adverse decision. At that time you may submit a statement indicating why you disagree with the College's decision. The Registrar will submit copies of all documentation provided by you, along with the College's determination, to CUNY's Office of the Vice Chancellor for Legal Affairs and General Counsel which will render a decision on your appeal.



## **CUNY RESIDENCY FORM (Part B)**

### AFFIDAVIT OF INTENT TO LEGALIZE IMMIGRATION STATUS

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	(Studen	t's Name)		being (	uury	swoi	n, dej	pose	s and says	tnat	ne/sne	noes not
currently	•	,	immigration	status,	but	has	filed	an	application	to	legalize	his/her
immigrat	ion statu	ıs or w	ill file such an	applic	ation	as so	on as	he/s	she is eligib	le to	do so.	
Student's	Signati	ıre					Ī	Date				
MOTADI	7FD											



# **CUNY RESIDENCY FORM (Part C)**

Semester: 1. Last Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ 2. EMPLID (CUNY ID): \_\_\_\_\_ Social Security: \_\_\_\_ 3. Current Address: \_\_\_\_\_ A. Live with parent's \_\_\_\_\_, or other relative's \_\_\_\_\_, or other than a relative \_\_\_\_\_ (1) If other relatives, describe relationship. (2) If other than a relative, describe situation. List below your address(es) including temporary address(es) and summer address(es) during the past 12 months, starting with your current address and working backwards. FROM TO COMPLETE ADDRESS Mo \_ Day \_ Yr \_ Mo \_ Day \_ Yr \_ \_\_\_ CITY STATE ZIP Mo \_ Day \_ Yr \_ Mo \_ Day \_ Yr \_ \_ STREET CITY STATE ZIP Mo \_\_ Day \_\_ Yr \_\_ Mo \_\_ Day \_\_ Yr \_\_ STREET CITY STATE ZIP 4. A. Parents' permanent address \_\_\_\_\_ STREET CITY STATE ZIP B. If you are under the age of 18, does anyone other than your parents serve as your legal guardian? Yes\_\_\_ No \_\_\_ If yes, what is their name and address: C. Where did you live during the last June through August period? If different from question 4A, give reason for being elsewhere during that period \_\_\_\_\_

EMPLOYER	ADDRESS	FROM TO
	10 10 10 11	11
	Ü	
B. What is the source of you	ar support?	
	dent income tax return during the past 12 mont	
D. Did you file a Federal in	ncome tax return during the past 12 months? Y	es No
What are your purposes for	residing in NYS?	
New York or the United Sta	financial aid, scholarships, or other benefits prates? Yes No  what benefits you are receiving	
Do you presently intend to p	permanently live in NYS? Yes	No Uncertain
If uncertain, please explain	<u> </u>	
Do you have any explanation	on you wish to present as a reason for not submination? Yes No	mitting any of the required docun
supporting residency determ		
supporting residency determ	S	
supporting residency determ	S	
If yes, please provide detail  Do you have any other pro	oof other than the items indicated on the atta	ached instructions for completing