INCOMING FIRST YEAR, NEW TRANSFERS, NON-DEGREE AND NEW GRADUATE STUDENTS ESTABLISHING RESIDENCY FOR IN-STATE TUITION

- Students applying for in-state tuition must have resided in NYS, with the intent to stay, for at least 1 year prior to the first day of class for the semester in which they are applying for a determination. Read the residency requirements carefully and submit the required documents along with your residency form. Completed applications are typically processed within 3-5 business days.

- Students under the age of 24 must provide their parents' most recent Federal tax returns, unless the student is married. If the student is claimed as a dependent on their parents' tax returns and parents' live out-of-state, the student is not eligible for in-state tuition. To provide proof of independence, students must submit their most recent Federal taxes, NYS taxes and W-2’s, as well as their parents' Federal tax returns which should indicate that they are not claimed as a dependent.

- Students that have a permanent resident card (green card) must provide a copy of the card. Students granted asylum or refugee or parole status must provide a copy of I-94 card or other proof.

- If your NYS residency has not been certified by the time your tuition bill is due (see due date on your bill), you will be required to pay the out-of-state rate. If the Residency Office later determines that you qualify for the in-state tuition rate, you will receive a tuition refund issued by the Office of the Bursar.

- No residency form will be accepted after the end of the semester for which you are applying for a determination.

- You can submit documents in any of the following ways:
  - Fax to 718-951-5257
  - E-mail to residency@brooklyn.cuny.edu
  - Mail to the Office of Admissions, 2900 Bedford Avenue, Brooklyn, NY 11210
  - Bring to Office of Admissions located in 222 West Quad Center
    *Office Hours: Monday, Thursday, Friday 9:00am-5:00pm and Tuesday and Wednesday 10:00am-7:00pm
*Subject to change. Please call before visiting the office.
Brooklyn College
Office of Admissions
CUNY RESIDENCY FORM

1. Last Name __________________________ First Name ___________________ Middle Initial ______

2. Soc.Sec.No. _______________ Date of Birth _____________ Phone No.(     ) ______________

3. Are you a U.S. citizen?   Yes □   No □   Are you a permanent resident alien?   Yes □   No □
   Are you here on a visa?   Yes □   No □   Type: ____________ Expiration Date: ___________

4. Did you attend a New York high school for two or more years, and graduate from that high school?
   Yes □   No □   If yes, high school name and location _____________________________
   Period of Attendance _____________________  Graduation Date ______________________

5. Do you have a GED issued by NYS? Yes □   No □   Date Issued: ___________

If you answered “yes” to question 4 or 5 and are a U.S citizen or permanent resident alien, you must complete Part C
of this Residency form.

If you answered “yes” to question 4 or 5 above, 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,
you must complete Part B of this Residency Form (affidavit) before a Notary Public.

If you answered “no” to question 4 or 5 and are a U.S. citizen, permanent resident alien, or have a visa type eligible
to qualify for resident tuition, you must complete Part C of this Residency From.

*Please refer to the first page of this form for a comprehensive list of eligible visa types.

To Be Completed by All Students

I certify that all information provided and all statements made in all sections of this Residency Form are
true and correct to the best of my knowledge.

I understand that if I provide false information or withhold relevant information in order to obtain
the resident tuition rate, The City University may revoke its determination of in-state residency, and that I
will owe non-resident tuition to the University for each semester or session that I have attended under
these circumstances. I also understand that I may be subject to disciplinary action.

DATE ___________________ STUDENT SIGNATURE ___________________________________

• The college will not review any residency determination unless the 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 finally determines that you are non-resident, you may appeal by notifying the Registrar’s
  Office (or other designated college appeal 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 (or other designated official) will submit the City University Residency Form, copies of all
  documentation provided by you and any statement made by you, along with the College’s
determination, to the University’s Office of the Vice Chancellor for Legal Affairs and General Counsel
  which will render a decision on your appeal.
Required Documentation Which Must Accompany the Residency Form

In addition to completing the residency form, students must submit required forms listed below as proof of residency. Important Note: In addition to the items indicated below, the college may, at its discretion, require the student to submit additional documentation if it believes that further proof is necessary in order that an accurate residency determination may be rendered.

YOU MUST SUBMIT EITHER:

ONE of the forms listed below in Column A OR TWO forms listed below in Column B

**Column A**

- Lease, deed or rent registration form (used for rent stabilized apartments) signed by the landlord which is either a public or private agency and the student or parent of the student with the same surname,
- Budget/benefit letter from New York City Public Assistance with the student’s New York address covering the 12 months period immediately preceding the first day of classes and including the student’s name,
- Benefit letter from Social Security with the student’s New York address covering the 12 month period immediately preceding the first day of classes including the student’s name,
- Copies of the most recent complete Federal and New York State tax returns with the preprinted address label and the corresponding W-2 form

**Column B**

- A valid New York State driver’s license showing the date of issuance one year prior to the first day of classes,
- Homeowner’s or renter’s insurance policy,
- Automobile registration,
- Automobile insurance certificate,
- New York State “non-license” which is issued to non-drivers (for identification purposes) by the Department of Motor Vehicles or other official City, State or Federal agencies, certificate or card,
- Voter registration certificate or card,
- Telephone or utility bills or payment for services such as cable TV covering a period of up to 12 months,
- Monthly bank or credit card statements covering a period of 12 months (dollar amounts may be blocked out),
- Armed forces identification card DD form 2A (green),
- Attendance as a juror in New York State,
- Apartment lease signed by the landlord (who is an individual and is not a public or private agency) and the student. If the student’s name does not appear on the lease, an “Alternate Lease Statement” which is available in the Office of Admissions or online may be substituted. The “Alternate Lease Statement” must be completed and notarized by both the person whose name appears on the lease/contract and the student. The person whose name appears on the lease/contract must submit proof (i.e., lease, telephone, utility, or similar type bills) of residency at his/her current address for the previous 12 months.
- Copies of the most recent complete Federal and New York State tax returns and the corresponding W-2 form. Responses to Federal form 4506 and New York state form 4506 requesting Federal and State tax information is acceptable if the Federal and State governments acknowledge that the party in question has in fact filed a tax return from the address noted,
- Postmarked mail addressed to a student at a New York Address dated at least 12 months prior to the first day of classes (a P.O. Box is not acceptable).
1. Last Name __________________________ First Name _______________ Middle Initial ______

2. Soc.Sec. No. _______________________

3. Current Address ______________________________  ________________  _______  ________
   STREET     CITY           STATE         ZIP
   A. Live with parents ________, or other relatives _________, or other than a relative ________
      1) If other relatives, describe relationship. _____________________________________________
      2) If other than a relative, describe situation. _______________________________________
         ______________________________________________________________________________

List below all your addresses, including temporary addresses and summer addresses during the past 12
months, starting from your current address and working backwards.

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<th>FROM</th>
<th>TO</th>
<th>COMPLETE ADDRESS</th>
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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 4.A., give reason
   for being elsewhere during period _________________________________________________
   ______________________________________________________________________________

5. A. Please list below all full-time and part-time employment (including summer employment and
   voluntary activities) during the past twelve months starting with the most recent employment.

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<th>EMPLOYER</th>
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</table>
5. B. What is the source of your support? ________________________________________________
__________________________________________________________________________________

C. Did you file a New York City/State resident income tax return during the past 12 months? ______
D. Did you file a Federal income tax return during the past 12 months? ________________________

6. What are your purposes for residing in New York City or New York State? _____________________

7. Have you applied for any financial aid, scholarships, or other benefits provided under the laws of the State of New York or the United States? Yes _____ No _____
   If yes, specify and indicate what benefits you are receiving. __________________________________
_______________________________________________________________________________

8. Do you presently intend to permanently live in New York City or New York State? Yes _____ No _____ Uncertain _____ If uncertain, please explain. __________________
_______________________________________________________________________________

9. Do you have any explanation you wish to present as a reason for not submitting any of the required documents supporting residency determination? Yes _____ No _____
   If yes, please provide details.________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

10. Do you have any other proof other than the items indicated on the attached instructions for completing the Residency Form you wish to present in support of your application to be declared a resident of York City/State for City University tuition purposes? Yes _____ No _____
    If yes, please provide details and attach relevant documents.
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

rev 09/10