



Summer _____
Fall _____
Spring _____

Student Affidavit Residency Reclassification

This form is to be completed and returned with documentation proving residency. Forms submitted incomplete or without documentation will be returned.

I am a student at Santa Barbara City College.

Legal Name (please print) _____

Student ID K _____ Date of Birth ____/____/____
mm dd yy

Current Address _____

City _____ State _____ Zip _____
Phone (____) _____ Email _____

This information is deemed relevant and necessary to properly determine your residence for tuition purposes pursuant to Education Code Section 68041. Failure to answer all questions may cause you to be classified as a non-resident. You are required to furnish documentation in support of your responses.

Do you hold any of the following visas:

- B C F H-2 H-3 J M O-2 P Q TN/TD

Have you held any of the above visas in the last two years? Yes No

Visa _____ Expiration Date ____/____/____
mm dd yy

(Note: Verification is required. You must present proof of status)

Physical Presence:

I have resided in the state of California since ____/____/____

Do you own property in California? Yes No Date purchased ____/____/____

Do you rent property in California? Yes No
(If lease is less than 12 months old, you will need to furnish previous lease as well)

Intent to Make California (CA) Your Only Residence:

Are you currently registered to vote in CA Yes No State ____ Date ____/____/____

Do you possess a valid CA driver's license or ID Yes No State ____ Date ____/____/____

Do you have a current CA motor vehicle registration Yes No State ____ Date ____/____/____

Selective Service Registration with CA permanent address Yes No

Do you have an active CA bank account? Yes No Date opened ____/____/____

CA License for professional practice? Yes No Lic: _____ Date ____/____/____

List the state and year in which your last two state income tax returns were filed:

State ____ Year _____ State ____ Year _____

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Financial Independence:

Will your parent(s) claim you as a dependent exemption for state and/or federal tax purposes for the current calendar year? **Yes** **No**

Were you claimed as an exemption for state and/or federal tax purposes by your parent(s) in either or both of the past two calendar years? **Yes** **No** Year(s) _____

Have you received or will you receive more than \$750 in financial assistance from your parent(s) in the current calendar year? **Yes** **No**

Did you receive or will you receive more than \$750 in financial assistance from your parent(s) in either or both of the past two calendar years? **Yes** **No** Year(s) _____

California W-2 forms with California address? **Yes** **No** Year(s) _____

Source of financial support for the past year? _____

Have you lived or will you live for more than six weeks with your parent(s) during the current calendar year? **Yes** **No**

Did you live more than six weeks with your parent(s) during either or both of the past two years? **Yes** **No** Year(s) _____

Are your parent(s) California residents? **Yes** **No**

If your parents are divorced or separated, indicate state of residence of each parent:

Mother

Father

Military Status:

Currently active Dependent of current active military
 Member discharged within the last year Member discharged over one year ago (veteran)

Date of discharge ___/___/___ Home state of record _____

Currently stationed in California? **Yes** **No**

If stationed in CA, is the duty for educational purposes ONLY? **Yes** **No**

I CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION ON THIS APPLICATION IS CORRECT AND UNDERSTAND THAT FALSIFICATION OR FAILURE TO REPORT CHANGE IN RESIDENCE MAY RESULT IN MY DISMISSAL. I further understand that all materials submitted by me for the purpose of residency reevaluation become the property of Santa Barbara City College. I understand that falsification, withholding pertinent data, or failure to report changes in residency may result in my dismissal.

Student Signature

Date

For Office Use Only

Date Received ___/___/___ Notified: ___/___/___ Approved Denied Processed by: _____