

# OFFICE OF THE REGISTRAR

## Residence and Tuition Status Application



Under North Carolina law, a person who qualifies as a resident for tuition purposes in North Carolina is eligible for a tuition rate lower than that for nonresidents for tuition purposes. Copies of the applicable law and of implementing regulations are available for inspection in the Office of the Registrar at the UNC Asheville OneStop Center, 253 University Hall, CPO #1370, One University Heights, Asheville, NC 28804 and may be examined upon request. In essence, the controlling North Carolina statute (G.S. 116-143.1) requires that, "To qualify as a resident for tuition purposes, a person must have established legal residence (domicile) in North Carolina and maintained that legal residence for at least 12 months immediately prior to his or her classification as a resident for tuition purposes." G.S. 116-143.1 also sets forth statutory definitions, rules and special provisions for special rules with respect to persons who are married or who are within identified subclasses of minors. Certain aliens may also qualify for resident tuition status.

### APPLICATION INSTRUCTIONS

1. **Respond to all questions** within the part(s) of the form you are to complete. If any question is not applicable to your situation, write "Not Applicable" or "N/A." Incomplete applications will not be processed.
2. **Print or type all responses.** If necessary, write "see attached" in the space provided and use additional sheets, numbering your response(s) the same as the corresponding question(s) and stapling or taping the separate sheets of paper to this application form.
3. Be completely accurate to the best of your knowledge and understanding. **Intentional falsification of your responses may subject you to disciplinary action, including dismissal from the institution.** When "date" is requested, give month, day and year.
4. **Sign and date this application where indicated** to make those acknowledgments and certifications necessary to render this a viable application.
5. Attach any documents which will support your claim. **Applications submitted without documentation will NOT be processed.**
6. Students are encouraged to make copies of all documents for their records before submitting their application packet for review. No copies will be provided by the Office of the Registrar.

1. Applicant student's full name (*Miss, Mr., Mrs., Ms.*) \_\_\_\_\_
2. Social Security number (*voluntary*) \_\_\_\_\_
3. Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_
4. Do you claim to be legal resident of the State of North Carolina?  Yes  No If so, from what date? \_\_\_\_\_  

*month, day, year*

Note: If your response to question 4 is no, you do not need to complete the rest of this form unless subsequently instructed to do so; sign, date and initial in appropriate places on page 6.

5. Beginning with what term of enrollment do you claim entitlement to the in-state tuition rate, if that is your claim? \_\_\_\_\_
6. Address while attending this institution (*current, not past*) \_\_\_\_\_  
 Home phone \_\_\_\_\_/ \_\_\_\_\_ - \_\_\_\_\_
7. Permanent home address \_\_\_\_\_ Since (*date*) \_\_\_\_\_  
 Home phone \_\_\_\_\_/ \_\_\_\_\_ - \_\_\_\_\_
8. Last previous home address in N.C. \_\_\_\_\_ Date (*from/to*) \_\_\_\_\_  
 Last previous home address outside N.C. \_\_\_\_\_ Date (*from/to*) \_\_\_\_\_
9. a) Are you currently enrolled at this institution?  Yes  No  
 b) Are you applying for admission?  Yes  No If yes, have you been accepted?  Yes  No
10. Secondary schools (*high or preparatory*) you have attended. (*List in sequence, beginning with most recent.*)

Name	Address ( <i>city and state</i> )	Dates attended ( <i>mo/yr to mo/yr</i> )
_____	_____	_____
_____	_____	_____
_____	_____	_____

11. Post-secondary schools (*universities, colleges, junior colleges, community colleges, etc.*) you have attended, in sequence (*including this institution*).

Name	Address ( <i>city and state</i> )	Dates attended ( <i>mo/yr to mo/yr</i> )
_____	_____	_____
_____	_____	_____
_____	_____	_____

If married, post-secondary schools (*universities, colleges, junior colleges, community colleges, etc.*) your spouse has attended, in sequence (*including this institution*).

Name	Address (city and state)	Dates attended (mo/yr to mo/yr)
_____	_____	_____
_____	_____	_____
_____	_____	_____

12. Has your residence status for tuition purposes ever been determined previously by any North Carolina public educational institution?

Yes  No If yes, give (a) Name of institution \_\_\_\_\_

(b) Classification:  Resident  Non-Resident (c) Last term you were so classified \_\_\_\_\_

13. Father living?  Yes  No Name \_\_\_\_\_

Permanent home address \_\_\_\_\_

Since (date) \_\_\_\_\_ Occupation \_\_\_\_\_

14. Mother living?  Yes  No Name \_\_\_\_\_

Permanent home address \_\_\_\_\_

Since (date) \_\_\_\_\_ Occupation \_\_\_\_\_

15. Are parents separated or divorced?  Yes  No If yes, who has custody of children? \_\_\_\_\_

16. Legal guardian?  Yes  No Name \_\_\_\_\_

Permanent home address \_\_\_\_\_

Since (date) \_\_\_\_\_ Occupation \_\_\_\_\_

Court-appointed at (place) \_\_\_\_\_ on (date) \_\_\_\_\_

17. Why and when did you move your home to North Carolina? \_\_\_\_\_

\_\_\_\_\_ (date) \_\_\_\_\_

18. When and from what state or foreign country did you move your home and legal residence to North Carolina?

Moved from \_\_\_\_\_ (date) \_\_\_\_\_

19. When do you claim that you began your legal residence (domicile) in North Carolina? (date) \_\_\_\_\_

20. Your marital status  Single  Married (date) \_\_\_\_\_  Divorced (date) \_\_\_\_\_  Separated (date) \_\_\_\_\_

Legal separation (date) \_\_\_\_\_  Widowed (date) \_\_\_\_\_  Marriage annulled (date) \_\_\_\_\_

21. If married, spouse's name \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Permanent home address \_\_\_\_\_ Date (from/to) \_\_\_\_\_

Last previous home address outside NC \_\_\_\_\_ Date (from/to) \_\_\_\_\_

Permanent legal residence (domicile) is (state) \_\_\_\_\_ Since (date) \_\_\_\_\_

22. List in calendar order to date of this application all places you have spent at least seven consecutive days during the past two years, including vacations and places lived.

Place	Dates (mo/yr to mo/yr)	Purpose
a) _____	_____	_____
b) _____	_____	_____
c) _____	_____	_____
d) _____	_____	_____
e) _____	_____	_____

If married, list in calendar order to date of this application all places your spouse has spent at least seven consecutive days during the past two years, including vacations and places lived.

Place	Dates (mo/yr to mo/yr)	Purpose
a) _____	_____	_____
b) _____	_____	_____
c) _____	_____	_____
d) _____	_____	_____
e) _____	_____	_____

23. Who last claimed you as an exemption on state and/or federal income tax returns, for what tax year, and in what state were returns filed?

- a) On state return for the \_\_\_\_\_ tax year, filed in (state) \_\_\_\_\_  
 Name \_\_\_\_\_ Relationship to you \_\_\_\_\_
- b) On federal return for the \_\_\_\_\_ tax year, filed in (state) \_\_\_\_\_  
 Name \_\_\_\_\_ Relationship to you \_\_\_\_\_

Is it the present intention of anyone (including yourself) to claim you as a dependent on state and/or federal income tax returns for the current tax year?  Yes  No If yes, who \_\_\_\_\_  
 Relationship to you \_\_\_\_\_ With respect to tax returns to be filed in what state(s)? \_\_\_\_\_

24. Places (states/foreign countries) where, and dates (month, day, year) when, you: 1) performed each of the following acts within the last two years, or 2) if not done within the past two years, where you last performed each act. (If never done, write "never.")

	State or Foreign Country	Month/Day/Year
a) Voted	_____	_____
b) Registered to vote	_____	_____
c) Called to serve on a jury	_____	_____
d) Acquired or renewed driver's license	_____	_____
e) Filed state income tax return	_____	_____

If this was a N.C. return, did the taxpayer show on the return that he/she was a *nonresident* of N.C. for any period of the tax year?  Yes  No If yes, what period? \_\_\_\_\_

If this was not a N.C. return, did the taxpayer show on the return that he/she was a *resident* of N.C. for any period of the tax year?  Yes  No If yes, what period? \_\_\_\_\_

- f) Had state income tax withheld during the current tax year \_\_\_\_\_
- g) Filed state intangibles tax return \_\_\_\_\_
- h) Listed personal property for taxation \_\_\_\_\_
- i) Acquired ownership of property for use as principal dwelling \_\_\_\_\_

j) Registered/licensed a motor vehicle (car, truck or other vehicle requiring a license)

Type of vehicle (list all)	Where registered/licensed	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

25. The car(s) or other motor vehicles you maintain and operate in N.C. are owned by \_\_\_\_\_  
 Address \_\_\_\_\_ Registered/licensed in (*state or foreign country*) \_\_\_\_\_
26. The car(s) or other motor vehicles you maintain and operate in N.C. are insured in the name of \_\_\_\_\_  
 Address \_\_\_\_\_

27. List the addresses at which you own and maintain personal property (clothing, furniture, cars, savings accounts, pets, jewelry, appliances, etc.) and give percentage value (of total personal property) maintained at each address.

	Address	Percentage value at this address
a)	_____	_____
b)	_____	_____
c)	_____	_____

28. List employment for wages for last two years.

	Employer ( <i>city and state</i> )	Address ( <i>mo/yr to mo/yr</i> )	Dates	Hours per week
a)	_____	_____	_____	_____
b)	_____	_____	_____	_____
c)	_____	_____	_____	_____
d)	_____	_____	_____	_____

If married, list your spouse's employment for wages for last two years.

	Employer	Address ( <i>city and state</i> )	Dates ( <i>mo/yr to mo/yr</i> )	Hours per week
a)	_____	_____	_____	_____
b)	_____	_____	_____	_____
c)	_____	_____	_____	_____
d)	_____	_____	_____	_____

29. List the sources and uses of the money required to meet your expenses.

	Preceding Calendar Year	Current Calendar Year
Source % of total ( <i>not \$</i> )	Used for	% of total ( <i>not \$</i> ) Used for
<i>Example: Spouse's earnings 33% rent 66%</i>	<i>rent, car payment</i>	_____
Your earnings	_____	_____
Parent(s) or guardian	_____	_____
Spouse's earnings	_____	_____
Other (specify)	_____	_____
Total	100%	100%

30. a) Are you now in, or a veteran of, active military service or other federal government employment?  Yes  No If yes:

Your home address upon entry \_\_\_\_\_  
 Your official home address now \_\_\_\_\_  
 Date this home address was declared \_\_\_\_\_ Your official "home of record" \_\_\_\_\_  
 Legal residence you most recently claimed on DD Form 2058 (*State of Legal Residence Certificate*)  
 \_\_\_\_\_ Date DD Form 2058 was completed \_\_\_\_\_  
 Your address upon discharge \_\_\_\_\_  
 Place to which you were paid mileage upon discharge \_\_\_\_\_

b) If you, your spouse, or one or both of your parents are now in active military service, attach to this application a copy of the *Leave and Earnings Statement* for the most recent pay period and for the pay period 12 months ago for each such person.

31. If you: 1) now live regularly with, 2) have lived with during the immediate preceding two years (except for vacation visits of fewer than seven consecutive days), or 3) continue to maintain close ties with, and periodically live with another person who is a relative by blood, marriage or court order, or a legal guardian of that person, or 4) have been claimed within the immediately preceding two years as a dependent for taxation purposes by someone other than yourself, answer the following for each such persons. (Answer only for one adult at each address. If married, complete for spouse; if separation occurred within the last two years, complete for spouse; if divorce occurred within the last two years, complete for ex-spouse.)

a) Name \_\_\_\_\_ Relationship to you \_\_\_\_\_  
 Permanent home address \_\_\_\_\_ Lived at that address since (date) \_\_\_\_\_  
 Last previous permanent home address \_\_\_\_\_ Date (from/to) \_\_\_\_\_  
 Is any such person now in, or a veteran of, active military service or other federal government employment?. Yes . No  
 If yes, provide the following for each person:  
 Home address upon entry \_\_\_\_\_  
 Official home address now \_\_\_\_\_  
 Date this home address was declared \_\_\_\_\_ Official "home of record" \_\_\_\_\_  
 Legal residence most recently claimed on DD Form 2058 (State of Legal Residence Certificate) \_\_\_\_\_  
 \_\_\_\_\_ Date DD Form 2058 was completed \_\_\_\_\_  
 Address upon discharge \_\_\_\_\_  
 Place to which you were paid mileage upon discharge \_\_\_\_\_

b) Places (states/foreign countries) where, and dates (month, day, year) when, such person: 1) performed each of the following acts within the last two years, or 2) if not done within the past two years, where such person last performed each act. (If never done, write "never.")

	State or Foreign Country	Month/Day/Year
Voted	_____	_____
Registered to vote	_____	_____
Served jury duty	_____	_____
Acquired or renewed driver's license	_____	_____
Filed state income tax return	_____	_____

If this was a N.C. return, did the taxpayer show on the return that he/she was a *nonresident* of N.C. for any period of the tax year?  Yes  No If yes, what period? \_\_\_\_\_

If this was not a N.C. return, did the taxpayer show on the return that he/she was a *resident* of N.C. for any period of the tax year?  Yes  No If yes, what period? \_\_\_\_\_

Had state income tax withheld during current tax year \_\_\_\_\_  
State or Foreign Country Month/Day/Year

Filed state intangibles tax return \_\_\_\_\_  
 Listed personal property for taxation \_\_\_\_\_  
 Acquired ownership of property for use as principal dwelling \_\_\_\_\_  
 Inclusive dates of such property ownership, from (date) \_\_\_\_\_ to (date) \_\_\_\_\_  
 Registered/licensed motor vehicles \_\_\_\_\_  
 Claimed you as an exemption on:  
 State income tax return \_\_\_\_\_  
 Federal income tax return \_\_\_\_\_

32. If you are an alien, answer and complete the following appropriately.

a) I possess a valid, current visa.  Yes  No My visa has a designation of \_\_\_\_\_ (A, B, C, D, E, F, G, H, I, J, K, L or M, plus a number) *Note: B, C, D, F, H, J and M visas reflect a presence in the United States not sufficient to support a bona fide claim to North Carolina legal residence.* My visa was issued as of (date) \_\_\_\_\_

b) I possess a valid, current Form I-151 (Alien Registration Receipt Card).  Yes  No

Its Registration Number is \_\_\_\_\_. It reflects my entry into the United States as an immigrant on (date) \_\_\_\_\_.

c) I possess a valid, current Form I-151 (*Temporary Evidence of Lawful Admission for Permanent Residence*).  Yes  No

It reflects my entry into the United States as an immigrant on (date) \_\_\_\_\_.

d) Immediately before I received my Form I-151 (*or Form I-551*) I possessed a valid, current visa.  Yes  No

This was an immigrant visa.  Yes  No This was a visa with letter designation of \_\_\_\_\_. Visa issued (date) \_\_\_\_\_

e) I possess a valid, current Form I-94 (*Arrival-Departure Record*) Parole Edition.  Yes  No Parole date on form is \_\_\_\_\_

f) I possess a document issued by Immigration authorities (*letter, form, certificate, etc.*) that shows I will later be issued one or more of the documents described above.  Yes  No Its effective date is \_\_\_\_\_. Identify \_\_\_\_\_  
(*Attach a copy if permitted by Immigration law. If not, be prepared to display the document for inspection upon request.*)

g) I possess a document issued by Immigration authorities not identified above that supports my claim to resident tuition status.

Yes  No Its effective date is \_\_\_\_\_. Identify \_\_\_\_\_

(*Attach a copy if permitted by Immigration law. If not, be prepared to display the document for inspection upon request.*)

33. Describe any other circumstances, events or acts, specifying their place and date, that you feel support your claim to North Carolina residence for tuition purposes. (*Use separate additional sheets.*)

\_\_\_\_\_ I hereby acknowledge that completion of question 2 (*Social Security number*) is voluntary, is requested by the institution solely for administrative convenience and record-keeping accuracy, and is requested only to provide a personal identifier for the internal records of this institution.

\_\_\_\_\_ I hereby certify that all information I have set forth herein is true to the best of my knowledge, pursuant to my reasonable inquiry where needed.

\_\_\_\_\_ I hereby acknowledge that the institution may verify the information set forth herein from sources accessible under law to the institution, but that the institution may divulge the contents of this application only as permitted under the Family Educational Rights and Privacy Act of 1974 if I am, or have been, in attendance at this institution.

\_\_\_\_\_  
Applicant's Signature Date

\_\_\_\_\_  
Signature of Parent or Guardian Date

(*if applicant is under 18 years of age*)

***Return completed application and supporting documents to:***

***Office of the Registrar  
253 University Hall, CPO 1370  
One University Heights  
Asheville, NC 28804***