

SUNY Institute of Technology
Student Accounts

APPLICATION FOR NEW YORK STATE RESIDENCY STATUS FOR TUITION BILLING PURPOSES

All applicants must complete all information in Section A.

Section B must be completed if you are claiming INDEPENDENT status.

Section C must be completed if someone other than you or your spouse claims you as a dependent for tax purposes or provides you with any financial support.

SECTION A (must be completed by all applicants)

Student ID or SSN _____ County of Residence _____

Name _____
Last First Middle

Legal Address _____
Street City State Zip

Telephone Number () _____ - _____ Email address _____

Length of time at this address (insert figures). ____/____. If less than three years, list your prior addresses below.
years months

From To Street City State Zip

Local address and telephone number (if different from above) _____

Age ____ Date of Birth ____/____/____ Marital Status _____

Citizenship: ____USA ____Other If other, list visa type or current immigration status _____

If you are a permanent resident, list your alien registration #A _____ Issued ____/____
attach copy

EDUCATION

Did you attend a New York State high school or an approved New York State program for General Equivalency Diploma (GED) examination? ____ Yes ____ No Month/Year of graduation or completion _____
Name of high school _____ State _____
attach completed high school transcript

Are you (or a parent) a member of the US Armed Forces on full-time active duty? ____ Yes ____ No
If yes, attach copy of home of record or military orders

Are you a first-time SUNY Institute of Technology student? ____ Yes ____ No ____
If No, please specify previous attendance Undergraduate ____ Graduate ____

Have you ever received a state award (TAP, Regents Scholarship, Empire State Fellowship challenger)?
____ Yes ____ No If yes, from what institution? _____

APPLICANT'S AFFIRMATION

The following statement must be completed and notarized before a Notary Public.

STATE OF _____

COUNTY OF _____

I, _____, the applicant herein, being duly sworn, do hereby affirm that I am a bona fide legal resident domiciled in the State of New York, and that all the information provided on this form and any attachments thereto, is accurate, complete and true to the best of my knowledge. I understand that providing false information knowingly will disqualify me from consideration for New York status.

Signature of Applicant _____

Sworn to before me this _____ day of _____, 200___. (Notary Public)

SECTION C

To be completed by the parent or the custodial parent with whom the student lives or who will be claimed as your dependent for income tax purposes.

Name _____ Relationship _____

Permanent Address _____

Length of time at this address _____ Telephone Number () _____ - _____

Previous address _____

Citizenship _____ USA _____ Other _____ If other, list visa type _____

Please list states in which you filed or will file resident taxes during:

2008 _____ 2007 _____ 2006 _____

Attach copy of current year SIGNED federal and state income tax return

Do you have a driver's license? _____ Yes _____ No _____ If yes, in what state? _____

Do you own a car? _____ Yes _____ No _____ If yes, in what state is it registered? _____

AFFIRMATION

The following statement must be completed and notarized before a Notary Public.

I hereby certify that the above applicant is applying with my knowledge for New York State residency status at SUNY Institute of Technology.

STATE OF _____

COUNTY OF _____

I, _____, do hereby affirm that all the information provided on this form and any attachments thereto, is accurate, complete and true to the best of my knowledge.

Signature of parent/guardian _____

Sworn to before me this _____ day of _____, 200___. (Notary Public)