



Application for Reclassification of Residence for Tuition Purposes

A student seeking reclassification of residency for tuition purposes is responsible for sufficiently demonstrating that he or she has met the requirements as listed in the University's Residency Guidelines. To apply for reclassification, attach this form to your personal statement and include all documentary evidence. This application must be notarized. Deadline for consideration is 2 weeks prior to the first day of classes for that term.

Section I: Personal Information

Name _____
Last First Middle Student 'F' Number

Date of Birth _____
Month/Day/Year Date entered Fairmont State University

Permanent Address _____
Street & Number (P.O. Box) City State Zip

Local Address _____
Street & Number (P.O. Box) City State Zip

Telephone Number (_____) _____

United States Citizen: Yes _____ No _____
If no, indicate: Type and Number of Visa _____ Date of Issuance _____ Port of Entry _____

Section II: Please attach your **Personal Statement** that explains the reason(s) that you moved to the State of West Virginia and why you believe you should be classified as a "resident student".

Section III: Please answer the following questions. Attach any documentary evidence that supports your responses.

1. List the permanent address(es) of your parents or legal guardians for the past **four** years.

Name (Relationship to Applicant)	Address	Dates
_____	_____	_____
_____	_____	_____

2. List your address (es) for the past **four** years.

Address	Dates
_____	_____
_____	_____

3. Where do you reside while attending Fairmont State University? _____

4. Did you live in West Virginia prior to entering Fairmont State University? Yes ___ No ___
If yes, when and for how long: _____

5. List all institutions that you have attended for the last **four** years, including high schools.

Institution	Location (State)	Dates Attended
_____	_____	_____
_____	_____	_____

6. When do you consider that your West Virginia residency began? _____
 7. Do you own real property (i.e. land, home, etc.) in West Virginia? Yes__No__
 8. Are you presently married? Yes__No__ If yes, does your spouse meet residency requirements as outlined in the University's guidelines? Yes__No__
 9. Are you currently registered to vote in West Virginia? Yes_____No_____ If yes, when did you register? _____
 10. Do you possess a valid photo identification (driver's license or non-driver ID) issued by the State of West Virginia? Yes__No_____
 11. Do you own a vehicle that is currently registered in West Virginia? Yes_____No__
 12. List the names and addresses of all of your employers for the last **four** years.
- | Employer | Address | Dates Employed |
|----------|---------|----------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
13. Have you filed a West Virginia state personal income tax return? Yes__No__ If yes, for which years _____
 14. Did your parent(s) or guardian(s) claim you as a dependent on their most recent tax return? Yes_____No _____
 15. What percentage of your tuition and living expenses is paid by your parent(s) and/or supporting person(s)? _____%

Section IV: U.S. Military Members and Veterans (If you are not a veteran or current member of the military, please leave this section blank.)

1. Are you currently an active duty member of the U.S. military? Yes__No__ If yes, please specify branch and current assignment/location:

2. Have you previously served on active duty for a period of at least two years? Yes_____No_____ If yes, were you honorably discharged? Yes_____No_____ Please list your separation date from active duty status: _____
3. Are you a current member of the West Virginia National Guard? Yes_____No_____ If yes, what month and year did you join? _____
4. Are you currently a member of a reserve component of the U.S. military? Yes_____No_____ If yes, what month and year did you become a reservist? _____
5. Have you been assigned a service-connected disability by the United States Department of Veteran Affairs? Yes_____No_____ If yes, please include documentation with this application.

Section V: Please provide legible copies of all documentation that verifies the information provided in this application.

CERTIFICATION: I do solemnly swear/affirm that the statement and evidence hereby presented in support of the foregoing application are true and correct; and, furthermore, certify that the permanent address listed in Section I above is my residence and that I intend to remain at that address indefinitely, and that I have more substantial connections with the State of West Virginia than with any other state.

_____(L.S.)
Signature of Applicant

SWORN TO AND SUBSCRIBED BEFORE ME THIS THE _____ DAY OF _____, 20 ____.

My Commission Expires: _____ (SEAL)
Notary Public