

Please Print:

Name of Student: _____

Student's Social Security Number: _____/_____/_____

Information for Residency Classification

A Florida "resident for tuition purposes" is a person who has, or a dependent person whose parent or legal guardian has, established and maintained legal residence in Florida for at least twelve months. Residence in Florida must be as a bonafide domicile rather than for the purpose of maintaining a residence incident to enrollment at an institution of higher education. To qualify as a Florida resident for tuition purposes, you must be a U.S. citizen, permanent resident alien, or legal alien granted indefinite stay by the Bureau of Citizenship and Immigration Services. Other persons not meeting the twelve-month legal residence requirement may be classified as Florida residents for tuition purposes only if they fall within one of the limited special categories authorized by the Florida Legislature and Florida Board of Education. All other persons are ineligible for classification as a Florida "resident for tuition purposes." Living in or attending school in Florida will not, in itself, establish legal residence. Students who depend on out-of-state parents for support are presumed to be legal residents of the same state as their parents. (s.1009.21, F.S.)

Non-Florida Residents

I understand that I do not qualify as a Florida resident for tuition purposes for the term for which this application is submitted and that if I should qualify for some future term, it will be necessary for me to file the required documentation prior to the beginning of the term to be considered for Florida residency classification.

Signature (in ink): _____

Date: _____

Florida Residents

This section must be completed in full if you claim Florida residency for tuition purposes.

- **Attach copies of required documentation** (if any).
 - A notarized copy of your and/or your parents' most recent tax return or other documentation **may** be requested to establish dependence/independence.
 - Dependent:** A person for whom 50% or more of his/her support has been provided by another as defined by the Internal Revenue Service.
 - Independent:** A person who provides more than 50% of his/her own support.
 - A copy of the marriage certificate is required in all cases of spouse claiming partner's residency.
- A. I am an **independent person** and have maintained legal residence in Florida for at least 12 months.
 - B. I am a **dependent person** and my parent or legal guardian has maintained legal residence in Florida for at least 12 months.
 - C. I am a **dependent person** who has resided for **five years** with an adult relative other than my parent or legal guardian and my relative has maintained legal residence in Florida for at least 12 months. (**Required:** copy of most recent tax return on which you were claimed as a dependent or other proof of dependency.)
 - D. I am **married to a person** who has maintained legal residence in Florida for at least 12 months. I have now established legal residence and intend to make Florida my permanent home. (**Required:** copy of marriage certificate, claimant's voter registration, driver's license, and vehicle registration.)
 - E. I was **previously enrolled at a Florida state institution** and classified as a Florida resident for tuition purposes. I abandoned my Florida domicile **less than 12 months ago** and am now re-establishing Florida legal residence.
 - F. According to the Bureau of Citizenship and Immigration Services, I am a **permanent resident alien or other legal alien** granted indefinite stay and have maintained a domicile in Florida for at least 12 months. (**Required:** immigration documentation and proof of Florida residency status.)
 - G. I am a **member of the armed services** of the United States stationed in Florida on active military duty pursuant to military orders, my home of record is Florida, or I am a **member's spouse or dependent child**. (**Required:** copy of military orders or DD2058 showing home of record.)
 - H. I am a full-time instructional or administrative employee **employed by a Florida public school, community college, or institution of higher education** or I am the **employee's spouse or dependent child**. (**Required:** copy of employment verification.)
 - I. I am part of the **Latin American/Caribbean Scholarship program**. (**Required:** copy of scholarship papers.)
 - J. I am a qualified beneficiary under the terms of the **Florida Prepaid College Program** (s.1009.98, F.S.). (**Required:** copy of Florida prepaid recipient card.)
 - K. I am living on the Isthmus of Panama and have completed 12 consecutive months of college work at the FSU Panama Canal Branch or I am the student's spouse or dependent child. (**Required:** copy of marriage certificate or proof of dependency.)
 - L. I am a full-time **employee of a state agency** or political subdivision of the state whose student fees are paid by the state agency or political subdivision for the purpose of job-related law enforcement or corrections training.
 - M. I am a **Southern Regional Education Board's Academic Common Market** graduate student. (**Required:** certification letter from State Coordinator.)
 - N. I am a **McKnight Fellowship** recipient. (**Required:** verification from Graduate Studies.)
 - O. I am an **active member of the Florida National Guard** who qualifies under s.250.10 (7) and (8) for the tuition assistance program.
 - P. I am an **active duty member (or the spouse of the member) of the Armed Services** of the United States attending a public community college or university within 50 miles of the military establishment where the member is stationed, if such a military establishment is within a county contiguous to Florida.
 - Q. I am an **active duty member (or the spouse or dependent child of a member) of the Canadian military** residing or stationed in Florida under the North American Air Defense (NORAD) Agreement, attending a public community college or university within 50 miles of the military establishment where the active duty member is stationed.

Person claiming residency must complete this section in full.

- Documents supporting the establishment of legal residence must be dated, issued, or filed **12 months before the first day of classes** of the term for which a Florida resident classification is being sought. All documentation is subject to verification.
- Additional documentation other than what is required above may be requested in some cases.

Please Print:

1. Name of person claiming Florida residency: _____ 2. Claimant's relationship to student: _____

3. Claimant's permanent legal address: _____ 4. Claimant's telephone number: (_____) _____

Street/P.O. Box _____ Apt. No. _____ City _____ State _____ Zip Code _____

5. Date claimant began establishing legal Florida residence and domicile: _____/_____/_____

6. Claimant's **voter registration**: State: _____ Number: _____ County: _____ Issue Date: _____/_____/_____

7. Claimant's **driver's license**: State: _____ Number: _____ Issue Date: _____/_____/_____

8. Claimant's **vehicle registration**: State: _____ Tag Number: _____ Issue Date: _____/_____/_____

9. **Non-U.S. Citizen only**: Resident Alien Number: _____ Issue Date: _____/_____/_____

(copy of both sides of card required)

I do hereby swear or affirm that the above-named student meets all requirements indicated in the checked category above for classification as a Florida resident for tuition purposes. I understand that a false statement in this affidavit will subject me to penalties for making a false statement pursuant to 837.06, Florida Statutes, and to FBOE Rule 6C-7.005 F.A.C.

Signature of person claiming Florida residency (as listed in Item #1 above)

Date

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