

University of Michigan Application for Resident Classification for Tuition Purposes

** FILING DEADLINES**

Fall Term . . September 30 Winter Term . . January 31 Spring, Spring/Summer, and Summer Terms . . July 31

Applications must be received in the Residency Classification Office by 5 p.m. on the deadline date or a \$300 late fee will be assessed.

No applications will be accepted after the last day of classes of the term.

Return the completed application to:

Residency Classification Office, Office of the Registrar, 1210 LSA Building, 500 S. State St., Ann Arbor, MI 48109-1382 fax (734) 615-2432

If you have questions or need assistance, call the Residency Classification Office at (734)764-1400 or view the Residency Guidelines at <http://ro.umich.edu/resreg.php>.

1. Name: Mr / Ms (circle one) _____
(Last) (First) (Middle)

2. Area Code and Phone Number _____

3. Date of Birth ____/____/____ Place of Birth _____

4. Social Security Number _____ UM Student Number _____

5. Requesting resident classification effective (circle one term only): Fall Winter Spring Sp/Su Summer
Year: _____

6. Circle UM Campus currently attending/will attend: Ann Arbor Dearborn Flint

7. If Current or Former UM Student, list School or College: _____ Class Level _____ Graduation Date _____

If Prospective UM Student, list School or College applied to: _____ Class Level _____ Date Degree Expected _____

8. Have you previously submitted an Application for Resident Classification? No _____ Yes _____ If yes, term and year _____
Has a parent, brother, sister, or spouse/partner ever applied for resident classification? No _____ Yes _____ If yes, provide name(s): _____

9. Are you a U.S. Citizen? Yes _____ No _____
If "No", are you a Permanent Resident Alien? No _____ Yes _____ If yes, Alien registration number: _____
Issue Date of I551 Card ____/____/____ Port of entry _____
If you are not a U.S. Citizen or Permanent Resident Alien, indicate your current visa status: _____

10. Provide the following information relative to your spouse or partner:

a. Name _____ Social Security Number _____
(Last) (First) (Middle)

b. Employed by _____ City _____ State _____
Job Title _____ Full or Part-time _____ Date Began ____/____/____

c. Enrolled at _____ City _____ State _____
Date Began ____/____/____ Full or Part-time _____ Residency Status _____

11. Starting with the most recent, list in sequence your current and all previous addresses, including short-term and temporary addresses, for the past five years. Show addresses where you have physically resided, not "mailing" or "permanent" addresses. *Also list any Michigan addresses prior to this period.* (Continue on back of page if necessary.)

Street Address City State or Country Zip Code Date From (m/d/y) Date To (m/d/y)

12. Regarding Parents:

a. Names of parents _____ (Father) _____ (Mother)

b. Current address where they physically reside (indicate effective dates of addresses--from m/d/y to m/d/y)

Father:

Mother:

c. If applicable, all previous Michigan addresses for parents (note the effective dates of each-- from m/d/y to m/d/y)

Father:

Mother:

Parents-in-Law: If you are married, do your parents-in-law (spouse's parents) live in Michigan? Yes _____ No _____

13. List in sequence all schools you have attended during the past six years, including UM and secondary schools. Start with the most recent. ALWAYS LIST HIGH SCHOOL, REGARDLESS OF HOW LONG AGO YOU ATTENDED.

<u>College/School</u>	<u>Location</u>	<u>Dates Attended</u> (from m/d/y to m/d/y)	<u>Full or Part-time</u>	<u>Degree Earned</u>	<u>Residency Status</u>
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14. List in sequence all employers you have had during the past four years. (Start with the most recent.)

<u>Employer</u>	<u>Address, Phone</u>	<u>Dates Worked</u> (from m/d/y to m/d/y)	<u>Full or Part-time</u>	<u>\$ Amount Earned</u>
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15. For the following years, indicate the source(s) of your TOTAL financial support, e.g., self, parents, other relative, etc:

<u>Year</u>	<u>Name of Source</u>	<u>Address</u>	<u>Relationship to you</u>	<u>\$ Amount or Percentage</u>
9/11 to 9/12				
9/10 to 9/11				
9/09 to 9/10				

For the year 9/12 to 9/13 list the expected source(s) of your TOTAL financial support, listing \$ amounts or percentages:

16. Were you claimed as a dependent on any person's federal or state income tax return during either (or both) of the past two tax years?

No _____ Yes _____ If "yes," list year(s): _____ and indicate the name and address and the relationship of that person to you:

(Name) (Relationship)

(Street Address) (City) (State) (Zip code)

17. Applicant's Statement Write a brief statement covering your purpose in coming or last returning to the state of Michigan. Also include any facts relevant to your establishment of a permanent domicile in Michigan as defined by the University's Residency Classification Guidelines. If you are basing residency on your parents, state the reason they are residing in the state.

18. Attestation "I certify that the information given in this application and in all attachments is true, correct and complete to the best of my knowledge. I understand that this information is subject to audit and that falsification of a University record may be grounds for legal or disciplinary action. I authorize the University of Michigan Residency Classification Office to verify all facts relevant to my claim to resident status, including verification of employment, verification of enrollment, and verification of income tax information and records filed with the Michigan Department of Treasury and the United States Internal Revenue Service."

I UNDERSTAND THAT SUBMITTING AN APPLICATION WITH INCOMPLETE OR INACCURATE INFORMATION OR WITHOUT THE DOCUMENTATION LISTED BELOW WILL RESULT IN SIGNIFICANT DELAYS IN PROCESSING TIME.

Signature of Applicant _____ Date ____/____/____

19. Please print your name and the address at which you wish to receive notice of action taken on your application to be classified as a Michigan resident. IT IS YOUR RESPONSIBILITY TO KEEP THIS ADDRESS CURRENT BY CONTACTING THE RESIDENCY CLASSIFICATION OFFICE DIRECTLY WITH ANY CHANGES.

(Name)

(Number) (Street)

(City) (State) (Zip Code)

The following documentation MUST be submitted with the application. Additional documentation may also be requested. Failure to provide documentation will delay the processing of the application.

- for all applicants: a copy of the driver's license of the applicant and of the person or persons upon whom the applicant is basing the claim to resident eligibility
- for all applicants: copies of the first and second pages of the most recent year's federal 1040 and state 1040 income tax returns and W2s for the applicant and the person or persons upon whom the applicant is basing the claim to resident eligibility
- for applicants born outside the U.S.: verification of U.S. citizenship or visa status for the applicant (and parents, if the applicant is a dependent)
- for applicants who are dependents: (see Residency Classification Guideline B-2), copies of the first and second pages of the parents' most recent year's federal and state income tax returns (forms 1040 and MI-1040) with all accompanying W2s (and Schedules C and E if self-employed), along with parents' most recent pay stubs showing Michigan taxes being withheld
- for applicants whose claim to eligibility for resident classification is based on permanent, full-time employment for themselves, a parent, spouse or domestic partner: a letter from the employer, written on letterhead (including phone number), stating the position, status and dates of employment. The letter should be accompanied by a copy of the most recent pay stub showing Michigan taxes being withheld.

TO BE COMPLETED BY THE RESIDENCY CLASSIFICATION OFFICE

Effective _____(Term) _____(Year)

Approved _____ Date _____ # _____

Denied _____ Date _____ # _____

c: _____

career: _____