

Applying for New York State Residency for Tuition Billing Purposes

APPLICATION DEADLINES

Completed residency applications must be submitted by the last date for add/drop for the term in which tuition is due. Applications received after the last date for add/drop will be reviewed and will become effective for the next term, if approved. **Incomplete applications will delay processing. All students must sign under the section titled Applicant's Affirmation on page 3.**

Definition of Domicile: A fixed, permanent home, for legal purposes, to which a person returns after a period of absence.

COMPLETING THE APPLICATION AND PROVIDING DOCUMENTATION

If you are charged tuition at the out-of-state rate and believe you are eligible for in-state tuition rates, you will need to apply for New York State Residency for Tuition Billing Purposes. At least three (3) documents demonstrating domicile must be submitted by all applicants. Additional documents also may be required. All documents must be dated one year or more prior to the start date of the term for which you are applying for residency. The burden of proof is upon the applicant to provide a completed application and supporting documentation to the Student Accounts office that he/she has established a domicile in New York state.

1. Independent Students — Are financially self-sufficient and no longer receive any financial support from parents or legal guardians.

Application:	Complete Sections A and B.
Documentation:	Must provide evidence of New
	York state domicile (see Column 1,
	Independent Student).

2. Dependent Students — Are financially dependent and receive financial support from parents, legal guardians, or spouse.

Application:	Complete Sections A and C.
Documentation:	Must be in the name of the
	parent, legal guardian, or spouse
	(see Column 2, Dependent Student).

Acceptable Document Type	1. Independent Student	2. Dependent Student
Alien Registration Card or Visa (Non-U.S. Citizens only) — must provide a copy of Permanent Resident Card or VISA in addition to three documents from the list below. Permanent Residents, Refugees, and Asylees, including those with pending applications, certain visa holders* and some undocumented aliens may establish NYS residency in accordance with these policies. *A, E1, E2, G, H-1B, H-1C, H4 (spouse or children of H-1B or H-1C), I, K, L, N, O1, O3, R, S, T, U, and V.		
Documents used to demonstrate domicile — at least th	ree (3) must be submitted	and more may be required.
NYS Drivers License	Student	Student and Parent/Spouse
NYS Learner Permit		
NYS Identification Card		
NYS Vehicle Registration	Student	Parent/Guardian/Spouse
NYS Voter Registration	Student	Parent/Guardian/Spouse
Signed NYS Residential Lease, Deed, or Property Tax	Student	Parent/Guardian/Spouse
Utility Bill — must provide two statements of the same type of utility service, e.g., electric/gas/heating/water/sewer/cable (Currently held account: one current statement and one statement issued 12 months prior to term start)	Student	Parent/Guardian/Spouse
Signed NYS Income Tax Return (from prior year) (Form IT-201 or IT-203) AND Form 1099 or Form W-2	Student	Parent/Guardian/Spouse
Documentation that applicant receives public assistance from New York state or from a city, county, or municipal agency in New York state	Student	Parent/Guardian/Spouse

At least three (3) documents must support the claim to have permanently resided in New York state for at least 12 consecutive months prior to the beginning of the term you are applying for.



Applying for New York State Residency Status for Tuition Billing Purposes

Student Accounts | 111 West Avenue | Saratoga Springs, NY 12866-6069 | 518-587-2100 | fax 518-580-4790 | www.esc.edu/StudentAccounts

Completed residency applications must be submitted by the last date for add/drop for the term in which tuition is due. Applications received after the last date for add/drop for the term will be reviewed, and made effective, the next term.

PLEASE PRINT INFORMATION CLEARLY — ANSWER ALL QUESTIONS*

Section A (Must be completed by ALL applicants. See table on page 1, "Documents Used to Demonstrate Domicile." All applicants must submit at least three (3) documents demonstrating domicile; more may be required.

Date of appli	cation		Name		
Term/year for	which you are ap	pplying for NYS residency	Last	First	MI
(e.g., Fall 2020))		Student ID		
Phone numb	ers		Age Date of I	birth	DD YYYY
Home			Marital status		
			Marital status		
			Citizenship 🗖 U.S.		. permanent resident
Work				-	itical asylum/refugee
			(must provide a cop If other, please specif		ident Card or VISA)
Email			Visa type	-	ie date
County of res	sidence		Expiration date		
Do you rent o	or own your hom	ne? 🗖 Rent 🗖 Own	If permanent resident,	, alien registration nu	mber and date issuec
			Other, please specify_		
Local addres	s (if different from	n permanent)	Permanent address		
Street			Street		
City		StateZip			
Length of time	e at this address (from MM YYYY to MM YYYY)	Length of time at this	address (from MM	YYYY to MM YYYY
If less than t	hree years at the	e above address, list addresses	for last three years:		
From	То				
MM YYYY	MM YYYY	Street Address		City	State, Zip
Education					
Did you atten (GED) examin	-	om a New York state high school	or an approved NYS pr	ogram for General E	Equivalency Diploma
(GLD) examin				Date of gradu	
Name of high	school attended	County	S	tate	MM YYYY
Did you atten	d this high school	for two years or more?			🗖 Yes 🗖 No
-	-	award (TAP, Regents Scholarship	, Empire State Fellowsh	ip, Challenger)?	🗆 Yes 🗖 No
If yes, at what	institution?				

*** INCOMPLETE APPLICATIONS WILL DELAY PROCESSING.**



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Voter Registration Information					
Are you a registered voter? 🗖 Yes 🗖 No	If yes	5			
		State of registration	Ε	Date of regist	ration
Driver License and Vehicle Information					
Do you have driver's license, state issued identification card					
or learner's permit? 🗖 Yes 🗖 No	If yes	SState of license		Driver's licen	
		State of license	Issue date	Driver's licen	se No.
Do you own a car? 🗖 Yes 🗖 No	If yes	5			
,	,	State of registration	Registration date	License pla	ate No.
Tax Filing Information					
In what state did/will you (or your spouse) file resident taxes for la	last yea	ar? current	year? ne	ext year?	
upon a parent, legal guardian, or spouse and proceed to Sectio Did you or will you live in an apartment, house, or building owne six weeks during last year?		eased by your parent	s for more than	🗖 Yes	□ No
Did you or will you live in an apartment, house, or building owners six weeks during this year?	ned or l	eased by your parent	s for more than	🗖 Yes	🗖 No
Were you or will you be claimed as a dependent on your parent	ts' Fede	eral or State Income T	ax Return of last y	ear? 🗖 Yes	🗖 No
Were you or will you be claimed as a dependent on your parent	ts' Fede	eral or State Income T	ax Return of this y	vear? 🗖 Yes	🗖 No
Are you a student who no longer receives parental support? If ye	yes, wh	en did you become ir	idependent?	🗖 Yes	🗖 No
				MM	YYYY

List below your sources of financial support/income for the past two (2) years:

FROM	то	Name and Address of Employer	Hours / Week

If not employed, please explain and attach proof of your financial resources.

Applicant's Affirmation (Must be completed by *all* students.)

I, ______, the applicant herein, being duly sworn, do hereby affirm that I am a resident of New York state and that it is my intention to remain in New York state, and that all information provided on this form, and 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 state residency status.

Signature of applicant

Date

* INCOMPLETE APPLICATIONS WILL DELAY PROCESSING.



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Section C (To be completed by the person — parent, legal guardian, spouse — who claimed or will claim the student as a dependent for income tax purposes last year. See page 1, column 2, for a list of required supporting documentation.)

			Relationship to applicant
Last First		MI	
Permanent Address			
			Length of time at this address
Street address City	/ State	Zip	(from MM YYYY to MM YYYY)
Do you rent or own your home?	Rent 🗖 Own		
Previous Address			
Previous Address			Length of time at this address
Previous Address Street address City	/ State	Zip	Length of time at this address (from MM YYYY to MM YYYY)
			· · · · · · · · · · · · · · · · · · ·

Last year		Current year		Next year	
Driver License and Vehicle Inf Do you have a driver's license?			If ves		
			State of license	lssue date	Driver's license No.
Do you own a car?	🗆 Yes 🗖 No		If yes State of registration	Registration date	e License plate No.

Affirmation (Must be completed by parent, legal guardian, or spouse.)

I do hereby affirm that the above information provided is accurate, complete, and true to the best of my knowledge.

Signature of parent/guardian/spouse	Date
	Office Use Only
	Denied by Approved by
	Term
	Date
	Banner update and email sent to student
Office Notes and Comments	