



PETITION TO CHANGE RESIDENCY STATUS – SPRING 2010

<p>IF YOU ARE A <u>NEW OR TRANSFER</u> STUDENT TO NAU FOR THE SPRING 2010 TERM, SUBMIT THIS PETITION BY THE JANUARY 22, 2010 DEADLINE TO:</p> <p>OFFICE OF UNDERGRADUATE ADMISSIONS SECHRIST RESOURCE CENTER SECHRIST HALL BUILDING 42 PO BOX 4084 FLAGSTAFF, AZ 86011-4084 PHONE 928/523-5511 FAX 928/523-6023</p>	<p>IF YOU ARE A <u>CONTINUING</u> NAU STUDENT FOR THE SPRING 2010 TERM, SUBMIT THIS PETITION BY THE JANUARY 22, 2010 DEADLINE TO:</p> <p>OFFICE OF THE REGISTRAR RESIDENCY RECLASSIFICATION OFFICE GAMMAGE BUILDING, ROOM 108 PO BOX 4103 FLAGSTAFF, ARIZONA 86011-4103 PHONE 928/523-7683 FAX 928/523-3943</p>
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This PETITION TO CHANGE RESIDENCY STATUS is designated for independent students. Different criteria are used for students applying for residency as a *dependent of parents living in Arizona*.

IF A STUDENT IS CURRENTLY ATTENDING NAU AS A WESTERN UNDERGRADUATE EXCHANGE STUDENT (WUE) THEY MAY NOT PETITION FOR ARIZONA RESIDENCY STATUS WHILE IN THE WUE PROGRAM.

First Day to Submit Residency Petition	Monday, October 26, 2009
Deadline to Submit Residency Petition	Friday, January 22, 2010
Deadline to File Reclassification Appeal	Friday, February 26, 2010

- **Failure to file a complete petition within the above prescribed time period is considered a waiver of the right to file for this term.**
- Normal processing time for completed petitions is **fifteen (15)** working days. If additional information is needed, the process may be delayed.
- **No extensions of payment deadlines are granted on the basis of unresolved residency status.** A refund of fees will be issued if necessary upon approval of residency.
- Denied students may appeal the decision to the Residency Appeals Committee (see above deadline).
- **The burden of proof rests with the student. Clear and convincing evidence** must be submitted to support all responses given in this petition.

INSTRUCTIONS

1. Respond to all questions and statements.
2. Attach all requested documentation. Failure to do so may be interpreted as evidence of non-residency.
3. Notarize required documents (student and parents, if applicable).
4. Use the "Final Checklist" to make sure you have included all necessary documentation.
5. Submit this petition and attachments to the appropriate office as indicated above.

All statements, requested information, and evidence provided with your petition packet must be consistent with those presented on other University/official documents and is subject to verification. Inconsistencies will jeopardize your case for residency. In addition, you may be subject to disciplinary action, dismissal/suspension from the University, repayment of tuition fraudulently waived, repayment of financial aid, or all of these.

GENERAL STATEMENTS

- A. The State of Arizona funds Arizona institutions of higher education. Since non-resident students (and their families) generally have not contributed to the source of this funding of public education in Arizona, they are required to pay fees that more closely represent the actual cost of their education.
- B. The rules and regulations for establishing residency for tuition purposes are defined by the Arizona Board of Regents, which is authorized by the Arizona Legislature and the state statutes (section A. R. S., 15-1801 through 1807) to provide classification for a tuition differential between resident and non-resident students.
- C. An individual must establish residency in Arizona before he or she is entitled to pay resident tuition rates. **The requirements to establish residency for tuition purposes are independent from those of other types of residency, such as voting or holding public office.** A resident for tuition purposes is someone who meets the requirements set forth in the Arizona Board of Regents Policy for Determining Tuition Status.
- D. These regulations for residency apply to all public universities in the State of Arizona. **Tuition classification as a resident at an Arizona community college does not mean that a student will be classified as a resident when transferring to a state-funded Arizona university.**
- E. **All three criteria for residency as outlined in this petition must be met. Submit documentation from the three criteria along with your application.**

DEFINITIONS

- A. **Domicile:** A person's true, fixed, and permanent home, not just his/her location while attending a college or university. A person can be domiciled in only one state at a time. Domicile is proven by a combination of physical presence, intent to establish a domicile, and financial independence.
- B. **Domicile Year:** A continuous period of 12 months of physical presence in the state of Arizona following the demonstration of intent to become a permanent resident. For residency classification purposes, **only the 12 months immediately preceding the term in question apply.**
- C. **Parent(s)/Legal Guardian:** A person's natural mother and father, or a person's legal guardian or adoptive parents. If parents are divorced and the child is under 18, "parent" is determined by the parent with legal custody. If parents are divorced and the child is 18 or over, "parent" means the parent who is eligible to claim the child as a tax dependent. **A legal guardian cannot be considered a parent if natural or adoptive parents are living and the primary purpose of the guardianship are to confer the residency status.**

RESIDENCY POLICIES ARE SUBJECT TO CHANGE WITHOUT NOTICE

FINAL CHECKLIST - PROVIDE THE FOLLOWING DOCUMENTATION

**mandatory documents*

NOTARIZED DOCUMENTS	
*Affidavit of Declarations – To be signed by student in the presence of a Notary Public	<input type="checkbox"/>
Parent's Affidavit - Support of Financial Independence (students 24 years of age or younger)	<input type="checkbox"/>
CRITERIA #1 FOR RESIDENCY – PHYSICAL PRESENCE (3 of 4)	
*Proof of Employment in Arizona - Pay stubs for 12 months AND	<input type="checkbox"/>
*Proof of Permanent Address in Arizona - Rent receipts, Lease agreement, OR	<input type="checkbox"/>
Proof of School Attendance in Arizona (other than NAU) - Academic Transcripts AND	<input type="checkbox"/>
*Letter signed by student explaining any gaps in 12 months continuous physical presence	<input type="checkbox"/>
CRITERIA #2 FOR RESIDENCY – INTENT TO ESTABLISH DOMICILE (7 of 9)	
*Arizona Driver's License or AZ ID Card – Residency will not be granted unless in place for 1 full year	<input type="checkbox"/>
*Arizona Motor Vehicle Registration - Residency will not be granted unless in place for 1 full year	<input type="checkbox"/>
*Arizona Voter's Registration – Attach photocopy of voter registration card	<input type="checkbox"/>
*Major Banking Services in Arizona – Attach letter from bank showing when banking services were established OR attach copy of bank statement which shows your name/AZ address and is dated at least 12 months prior to the start of the term in which you are petitioning for residency.	<input type="checkbox"/>
*State Income Taxes – Attach copies for the last 2 tax years; must have an AZ state tax return for the past year	<input type="checkbox"/>
*Federal Income Taxes – Attach copies for the last 2 tax years	<input type="checkbox"/>
Employment History	<input type="checkbox"/>
*Letter from employer assuring future employment in Arizona (If applicable)	<input type="checkbox"/>
*Explanation of why you came to Arizona, why you wish to remain, and plans for the future.	<input type="checkbox"/>
CRITERIA #3 FOR RESIDENCY – FINANCIAL INDEPENDENCE (4 of 9)	
*Pay Stubs or W-2 forms for the past 2 years	<input type="checkbox"/>
Tuition Costs for Out of State Schools for the past 2 years (If applicable)	<input type="checkbox"/>
*Documentation of Financial Aid for the past 2 years (If applicable)	<input type="checkbox"/>
Veterans' or Social Security Benefits for the past 2 years (If applicable)	<input type="checkbox"/>
Accident/Insurance Benefits for the past 2 years	<input type="checkbox"/>
Documented Inheritance	<input type="checkbox"/>
Federal/State Income Taxes for the past 2 tax years (also required for criteria #2 above)	<input type="checkbox"/>
*Parents' Federal Income Taxes for prior 2 tax years; for students age 24 or younger	<input type="checkbox"/>
*Letter from parent's health AND auto insurance providers stating that the applicant was not covered under parent's insurance for the current calendar year and the past two tax years. For student age 24 or younger.	<input type="checkbox"/>

Note: Graduate student please contact Graduate College at (928) 523-4348

PERSONAL DATA

NAU ID # _____ Undergraduate New/Transfer Undergraduate Cont. Student

Full Legal Name _____ E-mail Address _____

Complete Mailing Address _____
Street City State Zip

Phone Number () _____ Date of Birth _____ Age _____

Place of Birth _____ Date/Location of High School Graduation _____

Are you a U.S. citizen? Yes No

If no, citizen of what country? _____ Visa type _____ and number _____

Are you a U.S. Permanent Resident? Yes No if yes, date you filed your I-485: _____

Date Permanent Resident Status Granted: _____ (Attach a copy of both sides of your resident alien card)

SPOUSE INFORMATION

Spouse Name: _____ Phone Number: _____ Date of Marriage: _____

Permanent Address: _____ Employer Name/Address _____

PARENT INFORMATION

(THE INFORMATION BELOW IS REQUIRED IF YOU ARE CURRENTLY AGE 24 OR YOUNGER)

FATHER'S INFORMATION:

Name: _____ Home Phone: () _____

Permanent Address: _____

Employer Name & Address: _____

MOTHER'S INFORMATION:

Name: _____ Home Phone: () _____

Permanent Address: _____

Employer Name & Address: _____

PARENT/LEGAL GUARDIAN TAX INFORMATION: (To be completed by all students)

Are you eligible to be claimed as a tax exemption by your parents or legal guardian? Yes No

What are the two most recent years you were claimed as a tax exemption? _____ , _____

By whom, were you claimed? Father Mother Both Legal Guardian

Student Signature

Date

CRITERIA #1 FOR RESIDENCY - PHYSICAL PRESENCE (Instructions)

A person is not eligible for classification as a resident for tuition purposes unless that person can provide clear and convincing evidence that he/she has maintained **continuous physical presence** in Arizona with the intent to establish a domicile for the 12 months preceding the term in question. **If you have not met this physical presence requirement when the petition is reviewed, the decision will not be finalized until the 12 months have been documented.**

How can I show that I have maintained CONTINUOUS PHYSICAL PRESENCE in Arizona for twelve months?

1. Proof of Employment in Arizona:

Pay slips or letters from employers can be submitted as evidence of continuous physical presence. All months employed should be accounted for. Pay slips that do not clearly show your name, employer's name, and the appropriate inclusive dates are **not** considered clear and convincing evidence. If pay slips do not provide this information, a letter from the employer can be submitted. Such a letter should include your name, the address of the employer, the inclusive dates of employment, and the total amount earned during the domicile year.

AND

2. Proof of Maintenance of Permanent Address in Arizona:

Rent receipts, escrow statements (if purchasing a home), leases, or cancelled checks for rent or house payments covering the entire 12-month domicile year can be offered as evidence of physical presence. Documents that do not clearly show your name, the address, and the appropriate inclusive dates are **not** considered clear and convincing evidence. Where receipts, checks, etc., do not provide this information, a letter from a landlord or rental agent can be submitted. Such letters should include your name, the address of the dwelling, and the inclusive dates of occupancy. Letters should be on company letterhead, signed and dated.

OR

3. Proof of School Attendance in Arizona:

If you were enrolled in an Arizona school, college, or university during the domicile year, your physical presence during regularly scheduled classes can be documented by providing school records such as grade slips or transcripts. **(In the case of attendance at NAU, you need not copy transcripts or grade reports; your records will be consulted to verify attendance.)** You must account for all non-class breaks, vacation periods, and summer.

AND

4. Absences:

All gaps in your continuous physical presence not documented by school attendance, permanent address, and/or employment must be explained in writing in a letter signed by you. Please include dates and reasons of all absence(s). Extended periods may require verifying documentation.

CRITERIA #1 FOR RESIDENCY - PHYSICAL PRESENCE (Worksheet)

Please fill in the following worksheet to show your physical presence in Arizona

My continuous stay in Arizona began on (date) _____.

DATE	PERMANENT ADDRESS (Physical Residence)	EMPLOYMENT (Employer/City)	SCHOOL ATTENDANCE (School/Location)	ABSENCES (List dates & Location)
Dec. 2008				
Jan. 2009				
Feb. 2009				
Mar. 2009				
Apr. 2009				
May 2009				
Jun. 2009				
Jul. 2009				
Aug. 2009				
Sept. 2009				
Oct. 2009				
Nov. 2009				
Dec. 2009				

(ATTACH TO THIS FORM ALL DOCUMENTS SUPPORTING PHYSICAL PRESENCE)

CRITERIA #2 FOR RESIDENCY – INTENT TO ESTABLISH DOMICILE (Instructions)

Residency will not be granted until A. and B. below have been in place for one full year. A student must prove intent to establish a domicile in Arizona with the following documents:

- A. Arizona driver's license/Arizona ID card:** If you hold a license in another state, failure to obtain an Arizona license is clear and convincing evidence of your intention to remain a non-resident of Arizona. In essence, you are maintaining your affiliation with the other state.
- B. Arizona motor vehicle registration and license plates:** Under Arizona law, any vehicle not properly registered and licensed in the state (including motorcycles and motor scooters) is considered to be the property of a non-resident. **Failure to properly register and license a motor vehicle that is operated in Arizona, whether or not it is registered in your name, is clear and convincing evidence your intention is to remain a non-resident of Arizona.**
- C. Filing of Arizona State income taxes:** Filing an Arizona State tax return as a resident for all 12 months included in your domicile year is evidence of your intent to be considered a resident of Arizona. Payment of state income tax as a resident of any other state for any month of your domicile year is evidence of your intention to be considered a non-resident. An Arizona address should be listed on your tax returns. **Lack of sufficient income to file state taxes will not affect your intent to become a resident but may weaken your case for financial independence.**
- D. Filing of Federal Income Tax forms as an Arizona resident:** The address used on your federal tax return forms for your domicile year will be considered an indication of your permanent place/state of residence. Using an Arizona address on federal forms is evidence of your intent to be considered a resident of Arizona; using an address in another state is evidence of your non-residency. **If no federal tax was filed due to lack of sufficient income, your case for financial independence may be weakened.**
- E. Voter registration in Arizona:** Registering to vote and voting is, of course, optional in our country. Registration to vote and voting in Arizona during your domicile year, however, is considered evidence of your intent to be considered a resident of the state. Voter registration and/or voting in another state during your domicile year are evidence of non-residency.
- F. Submit a short letter as to why you (the applicant) came to Arizona and your plans for the future.**

CRITERIA #2 FOR RESIDENCY – INTENT TO ESTABLISH DOMICILE (Worksheet)

A. DRIVER'S LICENSE (Residency will not be granted unless in place for 1 year - attach copy of both sides)

State _____ License Number _____ Date current license issued _____

Is your current license a renewal of an AZ license? Yes No
If yes, indicate initial date of issue (provide DMV documentation) _____

Arizona ID card - Date issued _____ Number _____

B. MOTOR VEHICLE REGISTRATION: (Residency will not be granted unless in place for 1 year - attach copy of Arizona Motor Vehicle Title verifying date of registration)

Do you own a motor vehicle in Arizona? Yes No Do you operate a motor vehicle in Arizona? Yes No

Name of registered owner _____

State of residence _____ Relationship to you _____

AZ license plate number _____ Date purchased by you _____

Date of current AZ registration _____ Date of original AZ registration _____

C. TAX INFORMATION: Attach copies of your Federal and State Tax Forms with W-2 forms for the last two years. For the current calendar year, attach your most recent pay stubs showing earnings and Arizona withholding. **IF YOU DID NOT FILE STATE AND/OR FEDERAL TAXES DURING THE PAST TWO YEARS, ATTACH A COMPLETE EXPLANATION.**

D. VOTER REGISTRATION: (Attach photocopy of registration card)

Date Registered _____ Precinct/City/State _____

Date most recently voted _____ State most recently voted _____

I am currently not registered to vote in any state. I have not voted in any state within the last 12 months.

E. SUBMIT A SHORT LETTER AS TO WHY YOU (THE APPLICANT) CAME TO ARIZONA AND YOUR PLANS FOR THE FUTURE.

F. BANK ACCOUNTS IN ARIZONA: Dates established: _____ (Attach Letter of Verification from bank)

G. MILITARY RECORDS (If Applicable) Attach documentation showing Arizona as home of record and Leave and Earnings Statement showing Arizona State taxes withheld on earnings. Dates of service

H. FINANCIAL AID APPLICATION: FAFSA (if applicable) showing Arizona as state of residency

**I. ASSURED FUTURE EMPLOYMENT IN ARIZONA (If Applicable) (i.e. Employment contract).
Attach supporting letter or document.**

CRITERIA #3 FOR RESIDENCY - FINANCIAL INDEPENDENCE (Instructions)

Page 10 of the petition (Financial Independence – worksheet) is used to determine how the person has supported him/herself for the two year period. A person applying for classification as a resident must prove that he/she was financially independent two tax years immediately preceding the request for residency classification. A person is considered to be financially independent if he/she meets the following criteria:

1. The applicant was **self-supporting** for the **two years** immediately preceding the request for residency classification. Provide clear and convincing evidence that you were financially independent on the following worksheet.
2. The applicant **was not claimed as a tax dependent** by out-of-state parents for the **two tax years** immediately preceding the request for residency classification.
3. The applicant did not receive any **financial support** from parent(s), guardians, or others for the same **two years**.
4. The applicant was not dependent on the parents for **housing costs, health insurance or auto insurance** for the **same two years**.

On page 10, fill in each category for each time period. The following definitions are listed for your assistance:

EMPLOYMENT: List earnings generated from the student's employment. Documentation of such earnings can be shown with a W-2, end year tax forms, or check stubs.

PARENTS/LEGAL GUARDIANS: List any financial support received from parents, relatives, or legal guardians.

SPOUSE: List any financial support received from the spouse from the point in time you were married.

FINANCIAL AID: List here financial aid received for the appropriate term. Attach documentation of the awards. **PLUS LOANS** will automatically disqualify a student from being considered independent.

SCHOLARSHIPS: List here any scholarships received for the appropriate term. Attach documentation of the award.

TRUST FUNDS: List here the amount of withdrawals from the trust fund used to support the person during the appropriate time period. Please **DO NOT** list the value of the trust. See page 11 of the petition for further information regarding trust funds. Provide requested documentation.

OTHER: List any other source of income used to support the student during the appropriate time period. Provide clear and convincing documentation that the student was the source of the income.

TOTAL INCOME: Total the above income sources in this box.

TUITION COSTS: For the given terms, indicate the tuition cost paid. If the student was not enrolled at any institution, indicate tuition cost were zero (0) dollars.

TOTAL EXPENSES: Add the above tuition cost for the given time periods plus living expenses (see chart below). It is assumed that any one person would need at least \$8000 to pay housing, food, heat, clothes, etc. for one year. Depending on the term you are applying for residency, the prior 24 months may not be full year periods. If that is the case, the \$8000 will be prorated.

2008 (one full calendar year)	Add \$8000	(12 months)
2009 (one full calendar year)	Add \$8000	(12 months)

NOTE: Personal loans, **PLUS** loans, credit cards, gifts and cash earnings are **NOT** accepted as earnings of self support. Health and auto insurance policies **must** be separate from parents for **two years** immediately preceding the request for residency classification...

CRITERIA #3 FOR RESIDENCY - FINANCIAL INDEPENDENCE (Worksheet)

YOU MUST ATTACH DOCUMENTATION FOR EACH ENTRY - ALL STUDENTS MUST COMPLETE THIS FORM

Fill in the dollar amount for each category of earnings for each time period and total.

SOURCE OF SUPPORT DURING YEAR	Spring 2008/Fall 2008 Full Year (January – December)	DOLLAR AMOUNT	Spring 2009/Fall 2009 Full Year (January – December)	DOLLAR AMOUNT
EMPLOYMENT (Supply a copy of taxes, pay stubs or W-2 forms)		\$		\$
PARENTS/RELATIVES/LEGAL GUARDIAN(S)		\$		\$
SPOUSE		\$		\$
FINANCIAL AID (List by Name)		\$		\$
SCHOLARSHIP(S) (List by Name)		\$		\$
TRUST FUND (see page #12 also)		\$		\$
OTHER (Please specify)		\$		\$
TOTAL INCOME	Total you're above income here.	\$	Total you're above income here.	\$

TUITION COST PER TERM™	Spring 2008	\$	Spring 2009	\$
	Fall 2008	\$	Fall 2009	\$
	TOTAL EXPENSES FOR 2008 - Total your tuition costs (above) and add \$8000 for living expenses here.	+ _____ <u>+ 8000</u>	TOTAL EXPENSES FOR 2009 - Total your tuition costs (above) and add \$8000 for living expenses here.	+ _____ <u>+ 8000</u>

TOTAL INCOME MUST EXCEED TOTAL EXPENSES TO BE CONSIDERED FINANCIALLY INDEPENDENT

Note: Graduate student please contact Graduate College at (928) 523-4348

CRITERIA #3 FOR RESIDENCY - FINANCIAL INDEPENDENCE (Worksheet)

TRUST/INVESTMENTS (If applicable)

PROOF OF TRUST FUNDS:

1. Name and location of financial institution in which trust fund is maintained.
2. Trust Agreement or a description of duration of trust (i.e., dates established, length of trust agreement).
3. Description of source of funds such as grandmother's estate, parental savings, etc.
4. Tax forms from the appropriate years-showing interest or dividend income.
5. History of accounts listing deposits and withdrawals during the last two years. **Include evidence that withdrawals were made to meet educational expenses.**
6. If applicable, a statement explaining why the fund is not banked in Arizona.
Account should be in student's name or jointly with parent as custodian or trustee.

Name: _____ ID #: _____

I, _____, as the income beneficiary of my trust/investment account, authorize the administrator of my trust/investment account to release the following information and documentation to NORTHERN ARIZONA UNIVERSITY, Residency Classification Section, concerning the disbursement of funds. I also waive my rights of privacy under the **Family Education Rights and Privacy Act** for the purpose of discussing my file with my trustee.

1. Date trust/investment account was established? _____
Attach a copy of the original documentation establishing the trust.

2. Name, address, and telephone number of administrator or trustee, if applicable:

Name Address City State Zip

Telephone: (_____) _____

3. Name and address, and telephone number of financial institution in which trust fund is maintained:

Name Address City State Zip

Telephone: (_____) _____

4. Who is responsible for filing taxes on the trust? _____

5. Who is responsible for paying the taxes on the trust/investments? Beneficiary Trust

Attach copies of the federal and state tax forms for the prior two years.

I certify that the foregoing statements regarding my trust/investment accounts are correct. I understand that providing false or misleading statements concerning domicile shall be cause for dismissal from the University.

Student Signature

Date

CRITERIA #3 FOR RESIDENCY - FINANCIAL INDEPENDENCE (Worksheet)

PARENT'S AFFIDAVIT

- If you are 24 years of age or younger at the time you complete this petition, your parents must complete the affidavit below and have it notarized.
- If parents are divorced, the affidavit must be copied and completed by both parents individually.
- Both parents must submit completed Federal Tax Forms for **2007 and 2008**, and letters from their insurance providers stating that the applicant was not covered for either health or auto insurance in 2008 and 2009.
- Do not complete if married for the two tax years.

Dear Parents:

1. Did you or will you claim this applicant as an exemption for Federal income tax purposes for:

2007	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2008	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2009	<input type="checkbox"/> Yes	<input type="checkbox"/> No

2. Have you provided any financial support to the applicant for the calendar years?

2007	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2008	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2009	<input type="checkbox"/> Yes	<input type="checkbox"/> No

3. Did you provide health insurance coverage for the applicant during?

2007	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2008	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2009	<input type="checkbox"/> Yes	<input type="checkbox"/> No

4. Did you provide auto insurance coverage for the applicant during?

2007	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2008	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2009	<input type="checkbox"/> Yes	<input type="checkbox"/> No

All statements, information, and evidence presented are true and complete. I understand that inconsistencies in statements, information and evidence that I have presented in this Parent's Affidavit, as well as any effort on my son/daughters part to fraudulently claim Arizona as his/her state of legal domicile, will jeopardize his/her case for residency and subject him/her to disciplinary action including dismissal from the University, repayment of tuition fraudulently waived, repayment of financial aid fraudulently obtained, and may result in civil and criminal liability. I hereby grant permission for NAU representatives to verify any information provided.

Mother's Name

Father's Name

Signature of Mother

Date

Signature of Father

Date

State of _____ County of _____

Signed before me this _____ day of _____, 20_____

Signature of Notary Public: _____

My Commission Expires: _____

AFFIDAVIT OF DECLARATIONS

No application for residency reclassification will be considered unless this form is properly signed, dated, and notarized.

I, the undersigned, declare the following:

1. All statements, information, and evidence presented in and with this Petition for Change of Residency Classification are true and to the best of my knowledge consistent with the statements, information, and evidence I have presented elsewhere on NAU documents and other official documents;
2. I renounce all claims to residency in any state other than Arizona, I further declare Arizona to be my state of legal domicile not only for residency status for tuition purposes, but for all other purposes as well;
3. I understand that inconsistencies in statements, information, and evidence that I have presented in my Petition to Change Residency Status and any other effort on my part to fraudulently claim Arizona as my state of legal domicile, will jeopardize my case for residency and subject me to disciplinary action, dismissal/suspension from the University, repayment of tuition fraudulently waived, repayment of financial aid fraudulently obtained, or all of these;
4. I hereby grant permission for NAU representatives to verify any supporting evidence submitted with this petition.

Signature (sign in the presence of a Notary Public) _____

State of _____ **County of** _____

Signed before me this _____ **day of** _____, **20** _____

Signature of Notary Public: _____

My Commission Expires: _____