Residence Questionnaire

Directions: Please print clearly and answer each question. Incomplete or illegible forms cannot be considered and will be returned. Falsification or intentionally erroneous information is subject to perjury under the laws of the State of Washington, RCW 9A.72.085. All information will be kept confidential in accordance with the Family Educational Rights and Privacy Act of 1974. Once a domicile is established in Washington, it must continue for one year before you are eligible for resident tuition.

SECTION 1				1					
Name (Last, First, MI)				Day Phone Number		FOR OFFICE USE ONLY			
						Tumo			
						Туре			
Address (Street, State, Zip)				Student ID Numbe	r	Status			
Address (Street, State, Zip)					•	Olalus			
E-mail Address	Birth City, State	e, Country		Birth Date	Age	Today's Date			
	4			1		Effective Date			
1. Last high school attended		State	e	Year Graduated	l				
2. For what term are you now seeking				_	_	Resident Non-Resident			
residence classification?	Year 20	🗌 Fall 🛛 🗌	Winter	Spring	Summer				
If you have previously applied at this institution fr	or a change in res	sidence status, indicat	e. Term	Vear					
If you have previously applied at this institution for a change in residence status, indicate: Term Year									
						1			
3. Class Standing: 🔲 Undergraduate 🛛 G	raduate □Prof								
						Residence Classification Officer			
4. At this Institution, you are or will be enrolled a	ısa ⊡New S	itudent 🗌 Co	ntinuing Stud	lent 🛛 Ret	urning Former Stud	ent			
If continuing or former student, give number			0		•				
		-	-	-					
Credits Term Year _	Cr/	edits Term		Year	_ Credits	_ Term Year			
5. Country of citizenship:			5a. Do you	u hold permanent or	r temporary residen	t immigration status?			
						Sec. Yes No			
If not USA, answer 5a, 5b and 5c.			5b. Do you	u hold "Refugee-Pa	rolee," "Conditional	Entrant" or PRUCOL status?			
				-		□ Yes □ No			
			5c. Do you	i hold a visa classifi	cation of A, E, G, H	-1, I, K, or L?			
						Yes No			
Note: An immigrant refugee, and the spous				If yes to any of the above, you must attach a copy of both sides of Resident Alien Card, Form I-94, or other documentation. (If you are not a citizen of the United States and do not hold permanent or temporary resident immigration					
such refugee, may be exempted from payin differential if the refugee (a) is on parole sta									
immigrant visa, or (c) has applied for U.S. c			statu	status, "Refugee-Parolee", "Conditional Entrant", PRUCOL status or an A, E,					
						sified as a resident.)			
6. Have you received financial assistance from a during the past twelve months?	a state governme	ntal unit or agency	If yes, ind	If yes, indicate state, agency, type of assistance, disbursement dates, etc.					
	□ Yes	s 🛛 No							
7. Will you be receiving state financial assistance during the next twelve months?				If yes, indicate state, agency, type of assistance, disbursement dates, etc.					
	e during the next		n yee, ma	iouto otato, agonoy,	type of accietance,				
□ Yes □ No									
SECTION 2									
SECTION 2									
 Are you applying for resident status as a dep student whose parent or court -appointed leg 						this form, providing proof of his/her			
has maintained a bona fide domicile in the St		must be documen	ted by subm	requested supporting documentation. Verification of your dependent status nitting a true and correct copy of your parent's or legal guardian's state and					
Washington for at least one year?						of the disclosure required concerning			
Yes No the parent's or legal guardian's state and federal tax returns is limited to the listing of dependents claimed and the signature of the taxpayer and shall not require disclosure of financial information contained in the									
2 Are used and the far resident status as a first		returns.							
Are you applying for resident status as a finar Independent student?	ICIAIIY	If yes, you must co	omplete Sec	tion 3 of this form	and provide all re	quested supporting documentation.			
☐ Yes	🗆 No								
2a. Student's Sworn Statement:									
I have not been and will not be claimed as an exemption for federal Income tax purposes by any person except myself or my spouse for the current calendar year and for the									
calendar year immediately prior to the year in which this application is made; and I have not received and will not receive financial assistance in cash or in kind of an amount equal to or greater than that which would qualify me to be claimed as an exemption for income tax purposes by any person except myself or my spouse during the current									
year and for the calendar year immediately prior to the year in which this application is made. Digital Signatures accepted during the Stay Home, Stay Safe order.									
Signature Date									
2b. To further substantiate your financial Independence, you are required to submit appropriate documentation.									
• A true and correct copy of your state and federal income tax return for the calendar year immediately prior to the year in which this application is made. If you did not file a state or federal									
income tax return because of minimal or no taxable income, documented information concerning the receipt of such nontaxable income must be submitted.									
A true and correct copy of your W2 form filed for the previous calendar year.									
 Other documented financial resources. Such on the spouse of a married student. 	Other documented financial resources. Such other resources may include but are not limited to, the sale of personal or real property, trust fund, state or financial assistance, gifts, or earnings of the source of a married student.								
 If you are 24 or younger, provide a true and correct copy of the first and signature page of the state and federal tax return of your parents, legally appointed guardians, or person or persons who 									
have legal custody of you for the calendar year immediately prior to the year in which this application is made. The extent of the disclosure required concerning the parent's or legal guardian's state and federal tax returns is limited to the listing of dependents claimed and the signature of the taxpayer and shall not require disclosure of financial information contained in the returns.									
3. Are you on active duty military stationed in	the state of Was	hington or the spouse	e or depender	nt of such a person	?	Yes No			
4. Did you spend at least 75% of both your ju			•		•				
your parents/legal guardians domiciled in Washington for at least 1 year within the 5-year period before you graduated from high school? 🛛 Yes 🗌 No									

Directions:	Do not leave any questions blank. No decision can be made unless all questions are completed and all required documentation is
	submitted.

SECTION 3									
1. This section is being comp	pleted and signed by:		Date of your arrival in Washington :		Purpose of moving to Washington:				
			Month: Day Year						
Parent Legal G	uardian UStude	ent							
			Date you took action to officially declare Wash your permanent, legal domicile:	ington as					
			,permanent, regar dormono.						
			Month: Day Year						
2. List chronologically your employment and physical residence for the last two years giving exact information as requested below. If you were not employed, list your physical residence for the last two years. Attach additional page if necessary.									
DATES OF EMPLO				IPATION		HOME ADDRESS			
Mo. Day Yr. Mo.	Day Yr.	City	State Employer		Hrs/wk	Street City State			
Note: You must provide p checks. letter from	proof of your physical landlord, letter from	prese emplo	ence in Washington the past 12 months (e.g. over, etc.).	copies of I	rent receipts,	lease or home purchase agreements, cancelled rent			
			s, give dates, and reasons for your absence:						
DATES OF ABSI	ENCE		LOCATION		PURP	DSE OF ABSENCE			
Mo. Day Yr. N	lo. Day Yr. C	City	State						
├ ─── ├ ─									
	I								
4. Have you ever registered to vote?	lf yes, attach a copy of your	lf y	res , list date, city and state for your last two regis	trations.					
	current voter's	Da	te City		State	Date Voted			
🗌 Yes 🗌 No	card.		te City			Date Voted			
	If yes, give type of ye								
 Do you own or <u>use</u> any motor vehicles, RV's, 	IT yes, give type of ve	enicie,	, license number, state and dates of registry. Yo	u must att	tacn a copy o	r venicle registration (not the title).			
boats or mobile homes?	Type of vehicle		License Number		S	state Date of Registry			
□ Yes □ No									
	Type of vehicle		License Number		S	state Date of Registry			
6. Do you have a valid driver's license?	If yes, you must atta		If yes, in what state:	When did	d you first obta	in a driver's license in that state?			
	a copy of your curre driver's license.	ent		Date					
	Previous driver's		If yes, in what state:	When did you first obtain a driver's license in that state?					
🗌 Yes 🗌 No	license? □ Yes □ No			Data					
Do you have a bank account?	Do you have a bank account? If yes, please attach documentation of date		If yes, since what date?		Bank	Branch			
🗆 Yes 🗌 No	you opened accoun	nt.		City		State			
 Have you ever paid in-state tuition at any 					lave you ever	attended a Washington college/university for more than 6 □ Yes □ No			
public institution of	-			-	•				
higher education?			То			om To			
Yes No 9. Are you a US Citizen?									
	If no, attach a copy	of yo	ur Resident Alien Card, I-94 or other INS doci	umentation	n.				
🗌 Yes 🗌 No									
10. List business or professional licenses									
(name & state of issue)									
Additional Comments:									
	1								
STATEMENT OF INTE	NT								
I certify that I have dee	clared								
Washington as my true	, fixed,		• • • • • • • • • • • • • • • • • • •						
and permanent plac habitation.	e or Signatu	ire of	f Parent (if completing SECTION 3) _						
	Date								
CERTIFICATION Parent Address (Street, City, State)									
I certify under penalt	I certify under penalty of								
perjury under the laws of the Signature of Student									
State of Washington, RCW 9A.72.085 that the foregoing Date									
and all supporting									
documentation are tru correct.	e and								

AG Form #151 – Revised 1/15/02 – AG Approval 4/19/02. Revised by HECB 6/2009, AG approval 6/10/2009, effective 7/01/2009.