## **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.

| Name (Last, First, MI)   |                   |                         |  | Day Phone Numb   | er                   | FOR OFFICE USE ONLY              |                      |  |
|--|-------------------|-------------------------|--|--|----------------------|----------------------------------|----------------------|--|
|  |                   |                         |  |  |                      |                                  |                      |  |
|  |                   |                         |  |  |                      | Туре                             |                      |  |
| Address (Street, State, Zip)   |                   |                         |  | Student ID Number  |                      | Status                           |                      |  |
|  |                   |                         |  |  |                      |                                  |                      |  |
|  | Birth City, Sta   | te Country              |  | D: # D /   | Age                  | ☐ DEP                            | □ INDEP              |  |
| E-mail Address   | Dirtir Oity, Ota  | ic, Gourniy             |  | Birth Date   | Age                  | Today's Date                     |                      |  |
| Last high school attended  |                   | State                   | 2  | Year Graduate  | d                    | Effective Date                   |                      |  |
| Last high school attended State      For what term are you now seeking   |                   |                         | <u> </u>   | rear Graduate  | <u> </u>             | ☐ Resident ☐ Non-Resident        |                      |  |
| residence classification?  | Year 20           | ☐ Fall ☐                | Winter   | Spring   | Summer               | Resident                         | □ Non-Resident       |  |
| If you have previously applied at this institution f   | or a change in re | sidence status, indicat | te: Term   | Year   |                      |                                  |                      |  |
|  |                   |                         |  |  |                      | 4                                |                      |  |
| 3. Class Standing: ☐ Undergraduate ☐ Graduate ☐ Professional School:   |                   |                         |  |  |                      |                                  |                      |  |
| o. oraco oranging. Di oraci graduate Di oraci di Di oraci di Compositioni di C |                   |                         |  |  |                      | Residence Classification Officer |                      |  |
| 4. At this Institution, you are or will be enrolled a  | as a: New S       | Student                 | ntinuing Stud  | ent 🗌 Re   | turning Former Stud  | dent                             |                      |  |
| If continuing or former student, give number of credit hours for which you were registered during each of the last three terms and identify each term by session and year:   |                   |                         |  |  |                      |                                  |                      |  |
| Credits Term Year _  | C                 | redits Term             |  | Year   | Credits              | Term                             | Year                 |  |
|  |                   |                         |  | F  |                      |                                  |                      |  |
| 5. Country of citizenship:   |                   |                         |  | 5a. Do you hold permanent or temporary resident immigration status?  |                      |                                  |                      |  |
| W-1110A  |                   |                         |  | ☐ Yes ☐ No   |                      |                                  |                      |  |
| If not USA, answer 5a, 5b and 5c.  |                   |                         | 5b. Do you hold "Refugee-Parolee," "Conditional Entrant" or PRUCOL status? |  |                      |                                  |                      |  |
|  |                   |                         | 5c Do you  | hold a visa classit  | fication of A E G L  | L1   K or   2                    | ☐ Yes ☐ No           |  |
| Note: An immigrant refugee, and the spouse and dependent children of   |                   |                         |  | 5c. Do you hold a visa classification of A, E, G, H-1, I, K, or L?  Yes No  If yes to any of the above, you must attach a copy of both sides of Resident |                      |                                  |                      |  |
|  |                   |                         |  |  |                      |                                  |                      |  |
| immigrant visa, or (c) has applied for U.S. citizenship.  status, "Refugee-Parolee", "Conditional G, H-1, I, K, or L visa, you cannot be clas  |                   |                         |  |  |                      | Entrant <sup>"</sup> , PRŮCOL    | status or an A, E,   |  |
| 6. Have you received financial assistance from a state governmental unit or agency If yes  |                   |                         |  | If yes, indicate state, agency, type of assistance, disbursement dates, etc.   |                      |                                  |                      |  |
| during the past twelve months?   |                   |                         |  |  |                      |                                  |                      |  |
|  |                   |                         |  | cate state, agency   | , type of assistance | , disbursement date              | es, etc.             |  |
|  |                   |                         |  |  |                      |                                  |                      |  |
| Yes No   |                   |                         |  |  |                      |                                  |                      |  |
| SECTION 2  |                   |                         |  |  |                      |                                  |                      |  |
| Are you applying for resident status <b>as a dep</b>   | endent            | If ves. your parent     | t or legal gua   | ardian must comp   | olete SECTION 3 of   | this form. providi               | ng proof of his/her  |  |
| student whose parent or court -appointed legal guardian Washington domicile a  |                   |                         |  | equested support   | ting documentation   | n. Verification of ye            | our dependent status |  |
| Washington for at least one year? federal income tax return for the most recent tax year. The extent of the disclosure the parent's or legal guardian's state and federal tax returns is limited to the listing  |                   |                         |  |  |                      | required concerning              |                      |  |
| Yes No and the signature of the taxpayer and shall not require disclosure of financial information contained in the returns.   |                   |                         |  |  |                      |                                  |                      |  |
| Are you applying for resident status as a fina<br>Independent student?   | ncially           | If yes, you must co     | omplete Sec  | tion 3 of this forn  | n and provide all re | equested supportir               | ng documentation.    |  |
| Yes  | □No               |                         |  |  |                      |                                  |                      |  |
| 2a. Student's Sworn Statement:   |                   | f- d                    |  |  |                      | f th                             | adam was and fan Ma  |  |
| 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   |                   |                         |  |  |                      |                                  |                      |  |
| equal to or greater than that which would queen and for the calendar year immediately  |                   |                         |  |  |                      |                                  |                      |  |
| 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  |                   |                         |  |  |                      |                                  |                      |  |
| 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 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 spouse 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 Washington or the spouse or dependent of such a person?   |                   |                         |  |  |                      |                                  |                      |  |
| 4. Did you spend at least 75% of both your junior & senior years in a Washington state high school, and did you enroll in college within 6 months of leaving high school, and were   |                   |                         |  |  |                      |                                  |                      |  |
| your parents/legal guardians domiciled in  | •                 | •                       | •  | •  | •                    |                                  | ☐ 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 Date of your arrival in Washington : 1. This section is being completed and signed by: Purpose of moving to Washington: Day \_\_ Month: \_ Year\_ ☐ Parent Legal Guardian Student Date you took action to officially declare Washington as your permanent, legal domicile 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 EMPLOYMENT LOCATION OCCUPATION HOME ADDRESS City State Mo. Day Yr. Mo. Day Yr. Employer You must provide proof of your physical presence in Washington the past 12 months (e.g. copies of rent receipts, lease or home purchase agreements, cancelled rent checks, letter from landlord, letter from employer, etc.). Note: 3. If you were out of Washington during the last 12 months, give dates and reasons for your absence: DATES OF ABSENCE LOCATION PURPOSE OF ABSENCE Day Mo. Day Yr. City State If yes, attach a 4. Have you ever If yes, list date, city and state for your last two registrations. copy of your current voter's registered to vote? \_ City \_ \_ Date Voted \_ Date State ☐ Yes ☐ No Date \_\_\_\_\_ City \_\_\_\_\_ State \_ Date Voted \_ 5. Do you own or <u>use</u> any motor vehicles, RV's, If yes, give type of vehicle, license number, state and dates of registry. You must attach a copy of vehicle registration (not the title). boats or mobile homes? State \_ Date of Registry \_ Type of vehicle License Number ☐ Yes ☐ No \_\_ Date of Registry Type of vehicle License Number State \_ 6. Do you have a valid driver's license? When did you first obtain a driver's license in that state? If yes, you must attach a copy of your current driver's license. If yes, in what state: Date Previous driver's When did you first obtain a driver's license in that state? If yes, in what state: ☐ Yes ☐ No ☐ Yes ☐ No Date 7. Do you have a bank If yes, please attach If yes, since what date? Name of Bank Branch \_ documentation of date you opened account. ☐ Yes ☐ No State 8. Have you ever paid in-state tuition at any public institution of higher education? 8a. Have you ever attended a Washington college/university for more than 6 hours per term? $\ \ \square$ Yes $\ \ \square$ No If ves. date of last term If yes, where \_ Name of Institution Dates attended From Dates Attended: From ☐ Yes ☐ No 9. Are you a US Citizen? If no, attach a copy of your Resident Alien Card, I-94 or other INS documentation. ☐ Yes ☐ No 10. List business or rofessional licen (name & state of issue) **Additional Comments:** STATEMENT OF INTENT I certify that I have declared Washington as my true, fixed, and permanent place of Signature of Parent (if completing SECTION 3) \_\_\_ habitation. Date CERTIFICATION Parent Address (Street, City, State) 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 true and correct.