



Procedures for Petitioning for In-State Residency Independent Student

1. Complete the Domicile Affidavit, Independent Student, on the reverse side,
2. Provide proof that you have resided in Arizona for one year prior to the start date of the semester for which you are applying for in-state residency,
3. Students 24 years of age and under must provide a copy of federal income tax return filed by student or student's parents as a proof of student's independence,
4. Provide proof that you have taken steps to establish domicile (permanent residency) in Arizona.

Any of the following may be used in determining a student's domicile in Arizona (at least three required):

- Arizona and federal taxes
- Arizona drivers license
- Arizona voter registration
- Arizona vehicle registration
- Ownership of real property in Arizona
- Employment verification
- Lease/Rental agreement
- Proof of financial support

Submit documentation to the Enrollment Services Office.

GLENDALE COMMUNITY COLLEGE

DOMICILE AFFIDAVIT - Independent Student

Residency for tuition purposes is determined in accordance with state law (A.R.S. §15-1801 et. sec.) and regulations of the Maricopa Community Colleges Governing Board. All of the Maricopa Community Colleges are subject to the above statutes and regulations. Students who have questions about their residency should contact Enrollment Services for clarification.

The responsibility of registration under the proper residency classification is placed upon the student. Any student who is found to be classified improperly shall be required to pay full out-of-state tuition. In determining a student's classification, the college may consider all evidence, written or oral, presented by the student and any other information received from any source which is relevant to determining classification. The college may request written sworn statements or sworn testimony of the student. Furnishing false information to any official, college employee or office is a violation of the Student Code of Conduct (AR 2.5.2) and subject to disciplinary sanctions.

Please print or type (additional information may be submitted):

Name: Last, First, Middle: _____

Student Number (SS#): _____

Legal Address: _____

Mailing Address (if different): _____

Phone Number: () _____ Email Address: _____

Citizenship Status (check one): US Citizen _____ Refugee _____ Permanent Resident (green card) _____
Other (please specify/copy of I-94 may be required) _____

Date present stay in Arizona began: Month _____ Day _____ Year _____

Most recent state or country of residence PRIOR to moving to Arizona: _____

In what Arizona county do you reside? _____

If Maricopa County, what date did you move to Maricopa County: Month _____ Day _____ Year _____

Are you registered to vote? No Yes If yes, in what state and county are you registered? State: _____ County: _____

Do you have a driver's license? No Yes If yes, state issued: _____ Date issued: _____

Renewal: No Yes Original date issued: _____

Do you own a vehicle? No Yes If yes, vehicle license number: _____ State registered: _____ Date issued: _____

Renewal: No Yes Vehicle owned by you? Yes No

Are you currently a member or a dependent of a member of the U.S. Armed Forces stationed in Arizona pursuant to military orders? Yes No

Are you recently discharged or a dependent of someone who was recently discharged from the U.S. Armed Forces and your home of record at the time of discharge was Arizona? Yes No

List employers during the past two years:

Employer: _____ Employer: _____

Place of employment: _____ Place of employment: _____

Dates of employment: / / to: / / Dates of employment: / / to: / /

Did your employer require that you, your spouse, or parent be transferred to Arizona for employment purposes? No Yes

If yes, name of employer: _____

If you have been attending another college or university, please list the institution and the dates attended.

Institution: _____ Dates attended: / / to: / /

Did you pay "resident" or "non-resident" tuition at the above institution? _____

Are you a member of an American Indian tribe whose reservation land lies in Arizona and extends into another state? No Yes

If yes, name of tribe: _____ State: _____ Census #: _____

What are your present sources of income? Self-supporting (self/spouse) Parent or guardian

If parent/guardian, what is their State of residency? _____ Did you file State income tax during the past two years? No Yes

If yes, Tax year: _____ State filed: _____ Tax year: _____ State filed: _____

Other information that may support your residency (Refer to the college catalog for additional information or documentation).

I certify that the information above is accurate and true. I understand that falsification of any information is a violation of the Student Disciplinary Code (AR 2.5.2) and I may be subject to disciplinary sanctions and the assessment of out-of-state tuition for the period of time for which the domicile requirements were not fulfilled.

Applicant signature _____ Date _____

Approved _____ Denied _____ Date _____
College Signature _____