STATEMENT AND AFFIDAVIT
FOR RESIDENCY CLASSIFICATION
AT KENTUCKY PUBLIC COLLEGES AND UNIVERSITIES

OATH AND AUTHORIZATION FOR USE OF RECORDS

To the Student:  This statement must be notarized before returning. Do not sign this statement until you are directed to do so by a Notary.

State of ________________________________

County of ________________________________

The undersigned person, being first duly sworn, states as follows: That the foregoing statements and all supporting documents are, and each of them is, true and correct. That any and all of my documents maintained by this institution may be released to the Committee or its designated representative to be used by that Committee or its representative in the determination of my status as a resident or nonresident of the Commonwealth of Kentucky for admission and tuition assessment purposes.

________________________________________
Signature of Applicant

Subscribed and sworn to before me this _____________ day of _________________________ , _________ (year).

________________________________________
Notary Public

County of ____________________________________________________

My commission expires ________________________________________.
NOTE: All items marked with an asterisk (*) must have accompanying documentation.

I. BASIS FOR APPLICATION

CHECK ONE:

☐ Independent person demonstrating domicile and residency in Kentucky.

☐ Dependent person seeking residency and domicile of resident parent(s) or legal guardian.

☐ Seeking Kentucky residency status provided under Section 7 of 13 KAR 2:045. (Duty in the armed forces)

☐ Beneficiary of a Kentucky Educational Savings Plan Trust.

☐ Kentucky Contract Programs in Optometry and Veterinary Medicine – consider for the following schools:
   ☐ Southern College of Optometry
   ☐ University of Alabama
   ☐ University of Indiana
   ☐ Auburn
   ☐ Tuskegee

II. ENROLLMENT INFORMATION

1. Have you previously filed an application for determination of residency status?  ☐ Yes  ☐ No
   If yes, for what term? __________________________

2. Indicate the term and year (one term only) for which this application should be considered:
   ☐ Fall 20 _____  ☐ Spring 20 _____
   ☐ First Summer Session 20 _____  ☐ Second Summer Session 20 _____

3. Are you currently enrolled in a Kentucky college or university?  ☐ Yes  ☐ No
   If no, for which term do you plan to enroll? Term _____________________ Year ____________
   If yes, which institution: ____________________________________________

4. Check one:  ☐ Undergraduate  ☐ Graduate  ☐ Law
   ☐ Medicine  ☐ Dentistry  ☐ Pharmacy
   How many credit hours are you currently taking? ________________, or will be taking? __________________________

III. PERSONAL INFORMATION

1. Name: _______________________________________________________________________________________________________________
   Last First Middle                 Maiden, Jr., II, etc.

2. Social Security Number: _________________    ____________    ________________

3. Birthdate: Month _________ Day _________ Year ____________

4. State and Country of Birth: _____________________        ______________________________
   State Country

5. Permanent Address: ____________________________________________________________________________________________________
   Number Street
   City County State Zip

* 6. Present Address: ______________________________________________________________________________________________________
   Number Street
   City County State Zip

7. To which address should this decision be sent:  ☐ Permanent  ☐ Present

8. Phone Number (including area code): Home (_______) __________________ Work (_______) __________________
IV. DETERMINATION OF DEPENDENT/INDEPENDENT STATUS

* 1. Did you file a federal or state income tax return as an independent person claiming yourself as an exemption?
   Federal income tax forms? ☐ Yes ☐ No State income tax forms? ☐ Yes ☐ No

   If yes, for what most recent year? __________

* 2. Did either of your parents claim you as a dependent for the tax year preceding the date of this application on federal or state income tax forms?
   Federal income tax forms? ☐ Yes ☐ No State income tax forms? ☐ Yes ☐ No

   If no, when did either of your parents last claim you as an exemption on a:
   Federal income tax form? __________________ State income tax form? __________________

3. Does your parent or any other person currently claim you as a dependent or exemption for federal or state tax purposes?
   Parent? ☐ Yes ☐ No Other Person? ☐ Yes; who? ______________________ ☐ No

* 4. Indicate the present means of your financial support and sustenance.

   ANNUAL SUPPORT

   Work: $ _____________ Spouse: $ _____________ Parent: $ _____________ Other Persons: $ _____________
   Scholarships: $ _____________ Grants: $ _____________ Assistantships: $ _____________ Loans: $ _____________
   Agency: $ _____________ Financial Institutions: $ _____________ Trusts: $ _____________ Other: $ _____________

   For other, please explain. __________________________________________________________________________________________

   When did your parent(s)/legal guardian last provide you with any of the above-listed support? Month _____________ Year ______

   Please provide any additional information not specifically requested on the list of supporting documents but which may explain the nature of the financial support available to you.

   _________________________________________________________________________________________________________________________
   _________________________________________________________________________________________________________________________

V. INFORMATION IN SUPPORT OF DOMICILE

1. When did your present (i.e. your latest) stay in Kentucky begin? Date: __________________________

2. What was your primary reason for coming to Kentucky? ________________________________________________________________________

   What is your primary reason for your being in Kentucky at this time? ____________________________________________________________

3. What family do you have presently living in Kentucky? ______________________________________________________________________

4. Are you a citizen of the United States? (If yes, proceed to question number 5.) ☐ Yes ☐ No

   If you are not a citizen of the USA, please list country of citizenship ________________________________________________________

   * Are you a political refugee? ☐ Yes ☐ No

   * Do you have a permanent visa? ☐ Yes ☐ No If yes, when did you receive approval for your status from the Office of Immigration
     and Naturalization Services? Month _____________ Year ______

– continued –
If you have a permanent visa card, please give the card number, the date issued and date of expiration.

Card Number: __________________________ Date issued: ___________________ Expiration Date: ____________________

What type of visa do you hold? ____________________________ What is the status of your passport? ________________

List places where you have lived for at least the past five years (beginning with your most recent address):

Date(s)
From Mo/Yr To Mo/Yr Place of Residence Number/Street City State
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

List the name of your high school, state located, and date of graduation or GED:

School Name: __________________________________________________________________________________________________________________
City: __________________________ State: ________________ Year of graduation ____________

List educational institution(s) attended after high school (beginning with most recent institution):

Educational Institution City/ State Residency for Dates Attended Tuition Purposes
Full/Part (In-State or Out-of-State)
From Mo/Yr To Mo/Yr Time
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

The Kentucky Educational Savings Plan was established as an investment program for beneficiaries to defray the cost of higher education in the Commonwealth of Kentucky. 13 KAR 2:045 provides for beneficiaries of this program to be granted residency status for tuition purposes, if they meet the criteria set forth in Section 9.

Are you receiving benefits from the Kentucky Educational Savings Plan, covered under a vested participation agreement? □ Yes □ No

Have you lived in Kentucky while enrolled in 6 or fewer hours for the 12 months preceding the first day of classes of the term for which you are applying? □ Yes □ No

If yes, please indicate year(s). __________________________

Did you file a Kentucky state income tax return for either or both of the past two years? □ Yes □ No

Have you accepted full-time employment or transfer to an employer in Kentucky? □ Yes □ No

Have you accepted full-time employment or transfer to an employer in an area contiguous to Kentucky while maintaining domicile in Kentucky? □ Yes □ No

List your employers for the past five years (beginning with the most recent):

Dates
From Mo/Yr To Mo/Yr Employer City/State Average Number Hrs/Wk Wk/Yr
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

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13. Do you have licensing or certification for professional or occupational purposes in Kentucky?  
☐ Yes  ☐ No

If yes, what type? ____________________________________________________________

14. Have you paid the following taxes in Kentucky during the 12 months preceding the first day of classes of the term for which you are seeking determination of residency status?

☐ Occupational  ☐ Yes  ☐ No

* Real property  ☐ Yes  ☐ No

15. What real property do you, your parents, legal guardian, or spouse own and in which state is it located? Indicate which property is used by you as a residence.

<table>
<thead>
<tr>
<th>Property</th>
<th>Location of Property</th>
<th>Used by Student for Residency (Y/N)</th>
<th>Dates Used as Residence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Owned By</td>
<td>Owned</td>
<td></td>
<td>From (Mo/Yr) To (Mo/Yr)</td>
</tr>
</tbody>
</table>

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

* 16. Do you have a lease for 12 months or more for noncollegiate housing in Kentucky?  
☐ Yes  ☐ No

* 17. Do you operate a motorized vehicle in the state of Kentucky?  
☐ Yes  ☐ No

If yes, is this vehicle registered in your name?  
☐ Yes  ☐ No; owner’s name __________________________________

State in which vehicle is registered __________________ Vehicle License Number ___________________

If you do not operate a vehicle, what is your means of transportation? ______________________________________________________

Number of miles you travel to campus ___________ Number of miles you travel to work ______________________

* 18. Driver’s License Number: __________________ State in which license was issued: __________________

19. Where do you live during school vacation periods? ______________________________________________________________

* 20. Are you currently registered to vote?  
☐ Yes; where ___________________________  ☐ No

Have you ever been registered to vote in a state other than where you are currently registered?  
☐ Yes; where ___________________________  ☐ No

* 21. Are you now, or have you been, in the military?  
☐ Yes  ☐ No

If yes, please supply the following information.

When did you become an active member of the military? Month ______ Year ______

List active military service. (Exclusion of time spent in the Reserves) From: (month/year) _______ to: (month/year) _______

Was Kentucky your state of residency when inducted?  
☐ Yes  ☐ No (specify) ____________________

If no, what date, if any, did address change to Kentucky? Month ______ Year ______

Did you maintain, or are you maintaining, Kentucky as your legal residence while in the service?  
☐ Yes  ☐ No

Date of discharge: Month ______ Year ______

**Section VI, Supporting Information, relates to the basis for your request for determination of residency status, and you should complete all relevant items in this section. Completion is required if your relationship to any individual mentioned is relevant to residency in Kentucky; however, some of this information may still be relevant if you are filing as an independent person in your own right.**

VI. SUPPORTING INFORMATION

1. Parents

Father’s Name: __________________________________________________________

Father’s Permanent Address: _____________________________________________

-- continued --
Father’s Mailing Address:__________________________________________________________________________________________________________________________________________________________________________________________

City ___________________________ State ___________________________

Father’s Telephone Number: ( _____ ) ____________________________

How many years (continuously) has your father been living in Kentucky, if at all? __________________

* Provide the following information on your father’s current employer:

Name: _________________________________________________________________________________________________________________________

Address: _______________________________________________________________________________________________________________________

Phone: ( _____ ) ____________________________

Date Current Employment Began: Month _______________ Year ______

* Father’s Visa Type, if applicable: ____________________________________________________________________________________________

Mother’s Name: ________________________________________________________________________________________________________________

Mother’s Permanent Address: _____________________________________________________________________________________________________

Mother’s Mailing Address: _____________________________________________________________________________________________________

City ___________________________ State ___________________________

Mother’s Telephone Number: ( _____ ) ____________________________

How many years (continuously) has your mother been living in Kentucky, if at all? __________________

* Provide the following information on your mother’s current employer:

Name: _________________________________________________________________________________________________________________________

Address: _______________________________________________________________________________________________________________________

Phone: ( _____ ) ____________________________

Date Current Employment Began: Month _______________ Year ______

* Mother’s Visa Type, if applicable: ____________________________________________________________________________________________

2. Legal Guardian (complete if applicable)

Legal Guardian’s Name: ________________________________________________________________________________________________________

Legal Guardian’s Permanent Address: ___________________________________________________________________________________________

Legal Guardian’s Mailing Address: _____________________________________________________________________________________________________

City ___________________________ State ___________________________

Legal Guardian’s Telephone Number: ( _____ ) ____________________________

How many years (continuously) has your legal guardian been living in Kentucky, if at all? __________________

* Indicate date of guardianship: Month _______________ Year ______

– continued –
Provide the following information on your legal guardian’s current employer:

Name: _________________________________________________________________________________________________________________________
Address: _______________________________________________________________________________________________________________________
Telephone Number: ( ______ ) _______________________
Date legal guardian’s current employment began: _______________________________________________________________________________ _______

Guardian’s Visa Type, if applicable: __________________________________________________________

Marriage to a Kentucky resident may be a factor in determination of your residency status Section 10 (2)(k). If your spouse has fulfilled requirements for residency and domicile in Kentucky, it is very important that this section be completed and accompanied by supporting documentation. If you are filing this application as an independent person in your own right, several items in this part of the affidavit may still be supportive of your own claim to residency and domicile.

3. Spouse
   Name of spouse: _______________________________________________________________________________________________________________ 

   Date of marriage: Month _______________ Year ______ 

   What family does spouse have presently living in Kentucky? __________________________________________________________

   List of spouse’s place(s) of residence for at least the past 5 years (beginning with the most recent address):

<table>
<thead>
<tr>
<th>Dates</th>
<th>Place of Residence</th>
</tr>
</thead>
<tbody>
<tr>
<td>From (Mo/Yr)</td>
<td>To (Mo/Yr)</td>
</tr>
<tr>
<td>_______________________________________________</td>
<td>_______________________________________________</td>
</tr>
<tr>
<td>_______________________________________________</td>
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<td>_______________________________________________</td>
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</tbody>
</table>

   List the name of spouse’s high school, state located, and date of graduation or GED:

   School Name: ___________________________ City: ___________________________ State: ___________________________

   Date of Graduation or GED: Month _______ Day _______ Year ______

   List educational institution(s) attended by spouse since high school (beginning with the most recent):

<table>
<thead>
<tr>
<th>Educational Institution</th>
<th>City/ State</th>
<th>Dates Attended</th>
<th>Residency for Tuition Purposes</th>
</tr>
</thead>
<tbody>
<tr>
<td>From (Mo/Yr)</td>
<td>To (Mo/Yr)</td>
<td>Full-time/ Part-time</td>
<td></td>
</tr>
<tr>
<td>_______________________________________________</td>
<td>_______________________________________________</td>
<td>_______________________________________________</td>
<td>_______________________________________________</td>
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</tbody>
</table>

   List spouse’s employer for the past 5 years (beginning with most recent):

<table>
<thead>
<tr>
<th>Dates</th>
<th>Average Number Hrs/Wk</th>
<th>City/State</th>
</tr>
</thead>
<tbody>
<tr>
<td>From (Mo/Yr)</td>
<td>To (Mo/Yr)</td>
<td>Employer</td>
</tr>
<tr>
<td>_______________________________________________</td>
<td>_______________________________________________</td>
<td>_______________________________________________</td>
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</tr>
</tbody>
</table>

   Dates

   – continued –
Did your spouse file a Kentucky state income tax return for either or both of the past two years?  

☐ Yes  ☐ No  

If yes, please indicate years.  ______________________  ______________________  

* Did your spouse file a federal or state income tax return as an independent person claiming you as an exemption?  

Federal income tax forms?  ☐ Yes  ☐ No  

State income tax forms?  ☐ Yes  ☐ No  

If yes, for what most recent year.  ______________________  

* Did either of your spouse’s parents claim your spouse as a dependent for the tax year preceding the date of this application on federal or state income tax forms?  

Federal income tax forms?  ☐ Yes  ☐ No  

State income tax forms?  ☐ Yes  ☐ No  

If no, when did either of your spouse’s parents last claim your spouse as an exemption on a:  Federal income tax form?  __________  

State income tax form?  __________  

* Indicate your spouse’s present means of financial support and sustenance.  

ANNUAL SUPPORT  

Work: $ __________________  

Parent: $ __________________  

Spouse: $ __________________  

Other Person: $ __________________  

Scholarships: $ __________________  

Grants: $ __________________  

Assistantships: $ __________________  

Loans: $ __________________  

Agency: $ __________________  

Financial Institutions: $ __________________  

Trusts: $ __________________  

Other: $ __________________  

For other, please explain.  ______________________________________________________________________________________  

When did your spouse’s parent(s)/legal guardian last provide your spouse with any of the above-listed support?  Month __________  Year ______  

Please provide any additional information not specifically asked for on the list of supporting documents but which may explain the nature of the financial support available to your spouse.  ______________________________________________________________________________________  

____________________________________________________________________________________  

* 4.  Military  Indicate which of the following individuals are, or have been, in the military.  

☐ Father  ☐ Mother  ☐ Guardian  ☐ Spouse  

When did this individual become an active member of the military?  Month __________  Year ______  

Active military service (exclude reserve time) from:  Month __________  Year ______ to:  Month __________  Year ______  

Was Kentucky the state of residency at time of induction?  ☐ Yes  ☐ No (specify)  

If no, what date, if any, did address change to Kentucky?  Month __________  Year ______  

Did the person maintain, or is the person maintaining Kentucky as the person’s legal residence while in the service?  ☐ Yes  ☐ No  

Date of discharge:  ______________________________________________________________________________________  

Comments:  

If necessary, attach additional pages to describe other factors pertinent to your domicile and residency status.