INSTRUCTIONS - Application for Resident Classification
(Read all 4 Kansas Residency for Tuition Purposes pages first)

I’ve lived in Kansas over a year. Why do I have to fill out this long form??
Qualifying as a resident for tuition purposes requires more than just being present in the state for a year. And a change in residence classification has significant financial ramifications. We have to be able to justify each change with the auditors. This form provides, in one place, all the information we need to make, and justify, an informed residency decision. It also gives us more current information than we usually have on other forms that you filled out weeks or months earlier, and it provides your signed (and notarized) affirmation that all the information provided on it is true.

This form was developed with the attorney for the Kansas Board of Regents by representatives from all the state universities in Kansas, and all of them use the same form.

Now to the form! Please read each question carefully, and answer each one fully.
Exception: If you are completely self-supporting and have been employed full-time for the last twelve months, and have not been a full-time student, skip question 16 and just attach a copy of the first page of last year’s Kansas income tax return and a current pay stub with year-to-date totals.

Your signature must be notarized. We have notaries in the Registrar’s Office.
KANSAS BOARD OF REGENTS

APPLICATION FOR RESIDENT CLASSIFICATION FOR FEE PURPOSES

READ CAREFULLY AND ANSWER FULLY.
If more space is needed for any answers, please use an additional sheet of paper.

Full legal name
LAST NAME FIRST MIDDLE

Other names, if any, under which you have been enrolled or employed:

Current address while attending this institution
STREET AND NUMBER or RURAL ROUTE (a P.O. BOX IS NOT SUFFICIENT) PHONE
CITY STATE ZIP

Permanent address
STREET AND NUMBER or RURAL ROUTE CITY STATE ZIP

For which semester are you applying for residency?
SEMESTER YEAR

Have you previously applied for residency at a Kansas Regents' institution? □ Yes □ No
If yes, indicate institution and year you applied

Have you read the accompanying regulations pertaining to Residence for Fee Purposes? □ Yes □ No

Date of birth MONTH DAY YEAR Place of birth STATE or COUNTRY

Are you a CITIZEN of the United States? □ Yes □ No

If NO, have you been granted Immigrant or Permanent Resident status by the U.S. Immigration & Naturalization Service? □ Yes □ No

If NO, indicate type of VISA
If YES, attach a copy of your Alien Registration card.

When did your current period of physical presence in Kansas begin? MONTH / DAY / YEAR

Have you lived in Kansas continuously since this date? □ Yes □ No

Where did you live before moving to Kansas (before the date above)?
CITY/STATE/COUNTRY from MONTH/YEAR to MONTH/YEAR
CITY/STATE/COUNTRY from MONTH/YEAR to MONTH/YEAR
CITY/STATE/COUNTRY from MONTH/YEAR to MONTH/YEAR

Where did you spend the current/previous summers? (June thru August - provide specific dates)
CITY/STATE/COUNTRY from MONTH/YEAR to MONTH/YEAR
CITY/STATE/COUNTRY from MONTH/YEAR to MONTH/YEAR
CITY/STATE/COUNTRY from MONTH/YEAR to MONTH/YEAR

Marital Status: If married, provide the following:
Date of marriage (MONTH/DAY/YEAR)

Legal name of spouse LAST MAIDEN/BIRTH NAME FIRST MIDDLE

Complete CURRENT address and telephone number of spouse: ( ) AREA CODE AND PHONE NUMBER

STREET/NUMBER/APT./RURAL ROUTE CITY/STATE/ZIP CODE

You may be required to provide a copy of your marriage certificate.
PARENTAL INFORMATION (required if you are single and under 18 years of age OR are still claimed as a dependent on your parent’s tax return; recommended if you are single and one or more of your parents reside in Kansas)

a. Father's full legal name _____________________________ Address _____________________________ CITY/STATE/COUNTRY

b. Mother's full legal name _____________________________ Address _____________________________ CITY/STATE/COUNTRY

c. If your parents are divorced, which parent has legal custody of you? _____________________________

d. From which parent do you receive the preponderance of your support? _____________________________

e. If neither parent is living, or if you have a guardian, give the full name and address of guardian.

If requested, a certified copy of the court order establishing custody or guardianship must be presented. Guardianships established for the sole or main purpose of qualifying the ward for resident fees will not be honored.

f. Did your parents or guardian file a Kansas State Resident Income tax return for the last tax year? ☐ Yes ☐ No

Have you been licensed or certified to practice a profession in Kansas? (doctor, lawyer, nurse, teacher, etc.)

☐ Yes (IDENTIFY WHICH ONE) _____________________________ ☐ No

Where are you currently registered to vote? (city and state) ______________________________________

If registered in Kansas, when did you last register to vote in Kansas? __________________________________________

List ALL colleges you have attended in the last five years, including WSU, with dates of attendance, credit hours earned, and student resident status (for fees) at each institution:

<table>
<thead>
<tr>
<th>Name</th>
<th>INSTITUTION:</th>
<th>City, State</th>
<th>FROM: MONTH &amp; YEAR</th>
<th>TO: MONTH &amp; YEAR</th>
<th>CREDIT HOURS EARNED</th>
<th>FEE STATUS: Resident or Non-Resident</th>
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EMPLOYMENT RECORD: List all employment since your latest period of residence in Kansas began (latest employment first, list periods of full-time and part-time employment with the same company separately):

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<tr>
<th>COMPANY NAME</th>
<th>ADDRESS (street &amp; no., city, state)</th>
<th>FROM: MONTH &amp; YEAR</th>
<th>TO: MONTH &amp; YEAR</th>
<th>HOW MANY HOURS PER WEEK?</th>
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### Financial Support and Expenses

**a. Financial Support:** List all financial support for the past twelve months. Include scholarships, loans, grants, employment, personal savings, interest, governmental benefits, monetary gifts, spousal contribution, etc.

Provide documentation of all support listed below: e.g., current Kansas income tax returns, W-2's, current pay stubs, financial aid offers, trust, stock, mutual fund documents, statement of support by friends, family or relatives, etc.

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<th>Source of Support</th>
<th>Address</th>
<th>Dates</th>
<th>Total Dollar Amount</th>
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**Total Income** $__________________

**b. Expenses:** List all expenses for the past twelve months:

Note: If you share expenses, list only your portion of these expenses.

- Housing ................... monthly $__________________
- Food costs ................ monthly $__________________
- Phone, electric, gas, etc. .... monthly $__________________
- Health care costs/insurance ... monthly $__________________
- Vehicle and transportation . . monthly $__________________
- Clothing/laundry/entertainment . monthly $__________________
- Tuition and Fees per term:  Summer: $__________________ Fall: $__________________ Spring: $__________________ Total $__________________
- Books & supplies per term: Summer: $__________________ Fall: $__________________ Spring: $__________________ Total $__________________

**Total Expenses** $__________________

You may be required to provide documentation to substantiate all listed expenses.

**c. Do you have health insurance?**

- Yes  
- No  

If YES, who pays the cost? ______________________

If NO, who pays the cost of your health care? ______________________

**17** With what state did you file your last STATE income tax return? ______________________  YEAR AND STATE ______________________

*(Submit a copy of page 1 of your last federal and state income tax returns)*

**18** Were you claimed as a dependent on another person's last federal income tax return?  

- Yes  
- No  

WHO (name) ______________________ Relationship to you ______________________  YEAR ______________________

*(Submit a copy of page 1 of this person's last federal and state income tax returns)*

**19** Was Kansas personal property tax paid on the vehicle you currently own or drive?

- No          
- Yes  If yes, what year? ____________  
- No vehicle in my possession

**20** Provide information concerning the present license plate on the vehicle you own or drive.

- STATE ______________________ LICENSE PLATE NUMBER ______________________ DATE PLATE OBTAINED ______________________
- VEHICLE OWNED BY WHOM? ______________________  
- No vehicle in my possession.
21 What state issued your current driver's license? __________ License No. _______________ Date Issued __________

22 Why did you come/return to Kansas? ____________________________________________________________

23 Other than being physically present in Kansas, what relationships or obligations connect you to the state, making it your permanent home?

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

If family is cited in 22 or 23 above, please indicate for each family member in Kansas, relationship and location (example: uncle at Leavenworth).

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

24 How long do you plan to remain in Kansas?

__________________________________________________________________________________________

25 What are your plans after your academic work here is completed?

__________________________________________________________________________________________

__________________________________________________________________________________________

If you feel that there are other pertinent facts not covered by any of the previous questions/answers, please write them on a separate sheet of paper and attach it this form.

I CERTIFY THAT THE INFORMATION GIVEN ON THIS APPLICATION IS CORRECT. I UNDERSTAND THAT FALSIFIED INFORMATION CAN RESULT IN FINANCIAL OBLIGATION (NON-RESIDENT FEES) TO, AND DISMISSAL FROM THIS INSTITUTION AND THAT MAKING A FALSE WRITING IS A FELONY UNDER KANSAS LAW (K.S.A. 21-3711). I ALSO UNDERSTAND THAT INFORMATION FROM MY APPLICATION FOR ADMISSION AND OTHER UNIVERSITY RECORDS WILL BE CONSIDERED A PART OF THIS APPLICATION.

Date ___________ Daytime Phone__________________ Signature ____________________________ (IN THE PRESENCE OF A NOTARY PUBLIC)

NOTARIZATION:
Subscribed and sworn to/affirmed before me this _____ day of ________________, 20__, at ______________, CITY

Notary Signature: _______________________________________________________________ MY APPOINTMENT EXPIRES: ____________________________

Gina Crabtree, University Committee on Residency
102 Jardine Hall
Wichita State University
1845 Fairmount
Wichita, KS 67260-0058

RETURN TO ➔

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