Any full-time student classified as an out-of-state resident who feels that he or she qualifies as a resident of Connecticut may request a change of classification.

Connecticut General Statute Sec. 10a-29 specifies that the residence of an emancipated person is that of his or her parent. In addition, it specifies that one must maintain a clearly established residence in Connecticut for at least one year to establish a new legal residence; that an emancipated person who can provide evidence of permanent residence in Connecticut is eligible for classification as an in-state student for tuition purposes; and makes certain provisions for special cases.

DEFINITION OF TERMS

1. An "emancipated person" means a person who has attained the age of eighteen years and whose parents have entirely surrendered the right to the care, custody, and earnings of such person and who no longer are under any legal obligation to support or maintain such person. Note: This means that an emancipated person cannot be claimed as a deduction for federal or state income tax purposes by any parent or guardian. Also, in order to be considered an emancipated person, an individual cannot obtain monies or other financial aid which is given based upon the parents' or guardian's financial statement.

2. The term "domicile" denotes a person's true, fixed, and permanent home and place of habitation. It is the place where the person intends to remain, and to which he or she expects to return when leaving for purposes other than that of establishing a new domicile elsewhere.

GUIDELINES FOR DETERMINING RESIDENCE

1. A person seeking classification as an in-state student, if emancipated from parents, must be able to show proof of domicile within the State of Connecticut for a period of not less than one year.

2. No emancipated person shall be deemed to have gained residence while attending an educational institution in this state as a full-time student, in the absence of a clear demonstration that he has established domicile in the state.

3. An emancipated person's residence is considered to be that of the custodial parent and or financially responsible parent or guardian.

4. The spouse of any person who is classified or is eligible for classification as an in-state student shall likewise be classified as an in-state student.

5. A person does not gain or lose in-state status by reason of his or her presence in any state or country while an active duty member of the Armed Forces of the United States.

6. The term "active duty" refers to continuous honorable service of 181 days or more in any active duty component of the U.S. armed forces. Periods of training received by members of any Reserve or National Guard component do not qualify as active duty for the purposes of this definition. A photocopy of your Form DD-214 should be provided as support for this exemption to the statute.

7. Non-citizens studying at the University cannot become residents for purposes of tuition payment unless granted a Permanent Resident Visa by the United States Government. Students granted such visas may make application for classification as an in-state student when they have satisfied the necessary statutory requirements for legal residence.

All applicants must complete and return this form. A student's residence will be determined on the basis of the information supplied on the form and any other specifically requested information and supporting documents. Changes in residence can be recognized only through proper application and by fulfilling the necessary statutory requirements for legal residence.

Please answer all questions. Please sign and date form.
RESIDENCE AFFIDAVIT

All applicants must complete and return this Residence Affidavit

1. Social Security number: ____________________________

2. Full name: ____________________________
   (last name) (first name) (middle initial)

3. Place of birth: ____________________________
   (day) (month) (year)
   (country)

4. Permanent address: ____________________________

5. Legal residence: ____________________________

6. Parent(s) or Guardian(s) name(s)    Address(es)    Telephone(s)

7. Did or will your parent(s) or guardian(s) claim you last year or this current year as an income tax exemption:
   Last year: □ Yes □ No

   Current year: □ Yes □ No

8. Did either parent(s) or guardian(s) contribute to your support and/or college expenses in the past twelve months?
   □ Yes □ No   If yes, how much? $ ______

9. Addresses of the applicant for the past two years:

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<tr>
<th>From:</th>
<th>Year</th>
<th>To:</th>
<th>Year</th>
<th>Number and Street, City, State or Country</th>
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10. Spouse's full name: ____________________________

    Spouse's permanent address: ____________________________

    Spouse's present address: ____________________________
    ____________________________
    ____________________________
    ____________________________
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<th>Yes (x)</th>
<th>No (x)</th>
<th>If yes…</th>
</tr>
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<tbody>
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<td>11. Have you ever voted in the USA?</td>
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<td>State and year in which you last voted:</td>
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<td>12. Do you hold a valid driver's license?</td>
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<td>What state issued it?</td>
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<td>13. Do you own an automobile?</td>
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<td>Where is it registered?</td>
</tr>
<tr>
<td>14. Did you file state or city income tax returns in the past year</td>
<td></td>
<td></td>
<td>In what state(s)/city(ies) did you file?</td>
</tr>
</tbody>
</table>

15. Please provide the following items, which, while not proof of residency, do have “probative” value in this decision:

- Current driver's license
- Current automobile registration
- Current mortgage or lease (or rent receipts for the preceding one year)
- Federal and Connecticut income tax return for the most recent year
- Certified copy of voter registration
- Other items establishing proof of Connecticut residency

16. Additional information that may be helpful in determining your legal residence:
To the best of my knowledge and belief, the information given in this application is complete and accurate. I understand that my failure to disclose fully and accurately all facts relating to this application shall be grounds for suspension or expulsion from the University.

__________________________________________  __________/________/______
Student’s signature  Date

__________________________  ______________________
UNIVERSITY ACTION
Request:  □ Approved  □ Rejected  □ Pending  Effective:  Semester  Year

__________________________  ______________________
Signature of Chairperson, Residency Reclassification Committee  Date

NOTES

To the Student: Please return to the appropriate university: