RESIDENCY INFORMATION

IF ANY OF THE CATEGORIES BELOW APPLY, PLEASE CHECK THE APPROPRIATE BOX, PROVIDE REQUESTED INFORMATION AND/OR DOCUMENT, AND GO TO ITEM 10.

I am a part-time (50%) or full-time regular employee of the University System of Maryland or, I am the spouse of, or am financially dependent upon a parent or legal guardian who is, a regular employee of the University System of Maryland. Please indicate relationship:

Please attach a letter of verification from the Human Resources Office of the campus at which you or your spouse or parent or legal guardian is employed.

- I am a full-time active member of the U.S. Armed Forces whose home of residency is Maryland or one who resides or is stationed in Maryland, or the spouse or a 0 financially dependent child of such a person. Please attach a copy of your deed or lease (if applicable), or verification from the service that you have declared Maryland as your "home of residency" (if applicable); and the most recent assignment orders. Also, please indicate date of expected separation from the military
- I am a veteran of the United States Armed Forces who resides in Maryland and received an honorable discharge. Please attach proof of honorable discharge. 0
- I am a veteran of the U.S. Armed Forces residing in Maryland or I am the spouse or child of a veteran of the U.S. Armed Forces using educational benefits under the Post 0 9/11 G.I. Bill, 38 U.S.C. § 3311(b)(9) or 3319 and living in Maryland. (Submit a copy of the DD-214 and an official certification of eligibility.)
- I am eligible for in-state status considerations under the Maryland National Guard Nonresident Tuition Exemption. I am eligible because I (1) joined or subsequently served 0 to provide a critical military occupational skill or (2) am a member of the Air Force critical specialty code. I understand that I must provide documentation from my company commander for consideration.

IF NONE OF THE ABOVE IS CHECKED, applicants seeking in-state status must complete the following questions. Failure to complete all of the required items may result in a non-Maryland resident classification and out-of-state charges being applied. Residency classification information is evaluated in accordance with the University System of Maryland policy on residency. The applicant may be contacted for clarification of an item, or for additional information as necessary. PLEASE CHECK ONE:

- I am financially independent. I have earned taxable income and I have not been claimed as a dependent on another person's most recent income tax returns. 0
- I am financially dependent on another person who has claimed me as a dependent on his/her most recent income tax returns, or I am a ward of the State of Maryland. If a 0 ward of the State, please submit documentation and go to item 10.

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	Name of person upon whom dependent and relationship to a	applicant:				
	 a. How long have you been dependent upon this person? b. Is the person a resident of Maryland? Yes No c. Address of this person: 	?				
	 d. Is this person a citizen of the United States? Yes i. If no, type of visa: iii. Alien Registration No. 	ii. Expiration date of visa:				
	e. Has this person filed a Maryland state income tax return for the most recent year on all earned income including income earned outside of Maryland? Yes					
	If yes, list actual years Maryland income tax returns ha i. Years filed:	ave been filed within the past 3 years.				
	ii. If a Maryland tax return has not been filed within the	last 12 months, state reason(s):				
	f. Signature of this person:					
The	e Student Applicant is responsible for completing items 1 -	10.				
1.						
	Permanent address:					
	If less than 12 months, provide previous address:					
	Length of time at previous address yearsmont	ths				
2.	Are you residing in Maryland primarily to attend an educ	cational institution?	Yes	No		
3.	Are all, or substantially all of your possessions in Maryla	and?	Yes	No		
4.	Do you possess a valid driver's license?		Yes	No		
	a. If yes, initial date of issue c. Most recent date of issue	b. In what state? d. In what state?				
		0. III what state?				
5.	Do you own any motor vehicles? a. If yes, initial date of registration?	b. In what state?	Yes	No		
	b. Most recent date of registration	d. In what state?				
6.	Are you registered to vote?		Yes	No		
	a. If yes, in what state?	b. Date of registration:				
7.	c. Were you previously registered to vote in another state?	e most recent year? List the years you have filed Maryland income tax	Yes	No		
1.	returns within the past 2 years. a. Years filed:	most recent year? List the years you have med waryiand income tax	Tes	NO		
	b. If you did not file a tax return in Maryland within the last 12	2 months, state reason(s):				
8.	Is Maryland state income tax currently being withheld from	om your pay? If no, provide explanation.	Yes	No		
9.	Do you receive any public assistance from a state or loc	al agency other than one in Maryland?	Yes	No		
.	a If yes please evolain		100			

I certify that the information provided is complete and correct. I understand that the University reserves the right to request additional information if necessary. In the event the University discovers that false or misleading information has been provided, the Student Applicant may be billed by the University retroactively to recover the difference between in-state and out-of-state tuition for the current and subsequent semesters.

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Signature of Applicant