

## RESIDENCE CLASSIFICATION: All students must declare a residency status prior to the start of the term.

A Florida "resident for tuition purpose" is a person (or a dependent person whose parent or legal guardian) who has established and maintained legal residence in Florida for at least the last 12 consecutive months. Residence in Florida must be a bonafide domiciliary rather than for the purpose of maintaining a residence incident to enrollment at an institution of higher education. Other persons not meeting the 12 month legal residence requirement may be classified as Florida residents for tuition purposes only if they fall within one of the limited special categories authorized by the Florida Legislature [Florida Statue 240.1201(2)(a)]. (Statute subject to change) All other persons are ineligible for classification as a Florida "resident for tuition purposes."

To qualify as a Florida "resident for tuition purpose", you must be a U.S. citizen, permanent resident alien or a legal alien granted indefinite stay by the Immigration and Naturalization Service. Living in or attending school in Florida will not, in itself, establish legal residence. Students who depend on out-of-state parents for support are presumed to be legal resident of the same state as their parents unless one parent has established legal residence in Florida for more than 12 months. Residence in Florida must be for the purpose of establishing a permanent home and not merely incident to enrollment at an institution of higher education. Documents supporting the establishment of legal residence must be dated, issued or filed 12 months before the first day of classes of the term for which a Florida resident classification is sought.

### Definitions

**DEPENDENT:** A person for whom 50 percent or more of his/her support is provided by another as defined by the Internal Revenue Service.

**INDEPENDENT:** A person who provides more than 50 percent of his/her own support.

**(A copy of your and/or your parents' most recent tax return or other documentation may be requested to establish dependence/independence.)**

## NON-FLORIDA RESIDENTS ONLY

I understand I DO NOT qualify as a Florida resident for tuition purposes for the term for which this application is submitted and that if I should qualify for a future term, it will be necessary for me to file the required documentation prior to the beginning of the term in order to be considered for Florida residency classification.

\_\_\_\_\_  
Signature of Applicant in ink

\_\_\_\_\_  
Date (mm/dd/yy)

## FLORIDA RESIDENT FOR TUITION PURPOSES AFFIDAVIT

PRIOR TO THE FIRST DAY OF THE TERM, **YOU MUST HAVE SHOWN PROOF** OF FLORIDA RESIDENCY TO QUALIFY FOR IN-STATE TUITION.  
(IF YOU DO NOT QUALIFY AS A FLORIDA RESIDENT, SIGN THE NON-FLORIDA RESIDENT SECTION ABOVE)

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| <ul style="list-style-type: none"> <li><input type="checkbox"/> 1. I am an independent person and have maintained legal residence in Florida for at least the last 12 consecutive months.</li> <li><input type="checkbox"/> 2. I am a dependent person and my parent or legal guardian has maintained legal residence in Florida for at least the last 12 consecutive months.</li> <li><input type="checkbox"/> 3. I am a dependent person who has resided for the last five years with an adult relative other than my parent or legal guardian and my relative has maintained legal residence in Florida for at least the last 12 consecutive months. (Documentation Required)</li> <li><input type="checkbox"/> 4. A Florida public college/university declared me a resident for tuition purposes. Name of institution _____ (Documentation Required)</li> <li><input type="checkbox"/> 5. I am married to a person who has maintained legal residence in Florida for at least the last 12 consecutive months. I have established legal residence and intend to make Florida my permanent home. (Copy of marriage certificate required and proof of current Florida residency)</li> <li><input type="checkbox"/> 6. I abandoned my Florida domicile less than 12 months ago, and am now re-establishing Florida legal residence.</li> <li><input type="checkbox"/> 7. According to the United States Citizenship and Immigration Services, I am a permanent resident alien or other legal alien granted indefinite stay. I have maintained domicile in Florida for at least the last 12 consecutive months. (Copy of USCIS documentation required.)</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> 8. I am a member of the armed services of the United States and am stationed in Florida on active military duty pursuant to military orders, or whose home of record is Florida [or I am the member's spouse or dependent child]. (Copy of military paper work required.)</li> <li><input type="checkbox"/> 9. I am a full-time instructional or administrative employee employed by a Florida public school, community college or Institution of higher education [or I am the employee's spouse or dependent child]. (Copy of employment verification required.)</li> <li><input type="checkbox"/> 10. I am a qualified beneficiary under the terms of the Florida Pre-Paid Postsecondary Expense Program (S.240.551, F.S.). (Copy of card required.)</li> <li><input type="checkbox"/> 11. I am living on the Isthmus of Panama and have completed 12 consecutive months of college work at the F.S.U. Panama Canal Branch [or I am the student's spouse or dependent child].</li> <li><input type="checkbox"/> 12. I am a full-time employee of a state agency or political subdivision of the state whose student fees are paid by the state agency or political subdivision for the purpose of job-related law enforcement or corrections training. (Documentation Required)</li> <li><input type="checkbox"/> 13. I am a full-time student participating in a Linkage Institute. (S.240.137, F.S.) (Documentation Required)</li> </ul> |
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**ATTACH COPIES OF DOCUMENTATION INDICATED ABOVE--ADDITIONAL DOCUMENTATION** (e.g., copies of voter's registration, driver license, tax returns, deeds, etc.) may be required by the College in some cases. **ALL DOCUMENTATION IS SUBJECT TO VERIFICATION.** Someone other than the applicant (e.g., parent) should complete this affidavit if the applicant is dependent or seeks to be classified as a Florida resident by virtue of a relationship; otherwise, the applicant must complete this affidavit. **PLEASE PRINT:**

1. Name of Applicant \_\_\_\_\_ 2. Student ID or SSN: \_\_\_\_\_  
(The **CLAIMANT** is the person who is claiming Florida residency, e.g., the applicant (if independent), parent, spouse or legal guardian. **All of the questions below pertain to the claimant.**)
3. Name of Claimant: \_\_\_\_\_ 4. Relationship of Claimant to Applicant: \_\_\_\_\_
5. Permanent Legal Address of Claimant: \_\_\_\_\_
6. Date Claimant Began Establishing Legal Florida Residence and Domicile: \_\_\_\_\_ Telephone Number of Claimant ( ) \_\_\_\_\_
7. Claimant's Voter Registration: State: \_\_\_\_\_ County: \_\_\_\_\_ Number: \_\_\_\_\_ Original Issue Date: \_\_\_\_\_  
mm/dd/yy
8. Claimant's Drivers License: State: \_\_\_\_\_ Number: \_\_\_\_\_ Issue Date: \_\_\_\_\_  
mm/dd/yy
9. Claimant's Vehicle Registration: State: \_\_\_\_\_ Vehicle Information Number (VIN#): \_\_\_\_\_ Issue Date: \_\_\_\_\_  
mm/dd/yy
10. Claimant's Citizenship:  U.S. Citizen  Permanent Resident Alien \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (Copy of both sides of card required)  
Resident Alien Card Number Date Card Issued: mm/dd/yy
- Asylee or Refugee Alien  Other \_\_\_\_\_

### ADDITIONAL DOCUMENTATION MAY BE REQUESTED BY THE INSTITUTION

I do hereby swear or affirm that the above-named applicant meets all requirements indicated in the category checked above for classification as a Florida "resident for tuition purposes". I understand that a false statement in this affidavit will subject me to penalties for making a false statement pursuant to 837.06, Florida Statutes, and that a false statement in this affidavit may subject the above-named student to the penalties for making a false or fraudulent statement.

\_\_\_\_\_  
Signature of Applicant in ink

and of \_\_\_\_\_  
Person Claiming Florida Residency if other than Applicant

\_\_\_\_\_  
Date mm/dd/yy