

Are you a first-time SUNY Cortland student? Yes No _____ Undergraduate _____ Graduate
_____ Professional (Medical/Dental)

Have you received a state award (TAP, Regents Scholarship, Empire State Fellowship Challenger)?
Yes No If yes, from what Institution: _____

Have you had or will you be applying for a Stafford Loan (formerly the Guaranteed Student Loan)?
Yes No

Driver License and Vehicle Information

Do you have a Driver's License? Yes No If yes, in what state: _____
Date Issued: _____ **(Attach copy of license)**

Do you own a car? Yes No If yes, in what state is your car registered? _____
Date issued: _____ **(Attach copy of registration)**

Will you be registering a vehicle with University Police? Yes No
If yes, what state is vehicle registered in? _____
(Attach copy of registration)

Plate Number: _____ Owner: _____ Registration Date: _____ / _____

Voter Registration Information

Are you a registered voter? Yes No If yes, which state are you registered in? _____
Registration Date: _____ / _____ **(Attach copy of voter registration)**
Month Year

In what state did you (or your spouse) file resident taxes for the last two years? _____
Where will you file for the current year? _____ **(Attach copy of most recent signed Federal and State Income Tax)**

Section B

This section must be completed if you are claiming independent status. If you are financially dependent on your parents, please proceed to Section C. Individuals under the age of 22 are generally not eligible for independent status. Students must provide evidence of one year of independent living in order to be considered emancipated.

Did you or will you live in an apartment, house or building owned or leased by your parents for more than six (6) weeks during the last two (2) years:

200__ Yes No 200__ Yes No

Do you rent or own? _____ Rent _____ Own **(attach copy of signed lease, deed, or tax bill for last 12 months)**

Were you or will you be claimed as a dependent on your parents' federal or state income tax return for the prior and current year:

200__ Yes No 200__ Yes No

Amount of financial support provided to you by your parents or guardian during the prior and current year:

200__ \$ _____ 200__ \$ _____

Are you an emancipated minor or adult student who is financially independent from parental support?
Yes No

If yes, when did you become independent? _____ / _____
Month Year

List below your sources of financial income for the last two (2) years:

<u>From</u>	<u>To</u>	<u>Name and Address of Employer</u>	<u>Hours Per Week</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If not employed, please list your financial resources:

Applicants Affirmation:

The following statement must be completed and notarized before a Notary Public:

STATE OF NEW YORK

COUNTY OF _____

I, _____ the applicant herein, being duly sworn, do hereby affirm that I am a bona fide legal resident domiciled in the State of New York and that all the information provided on this form and any attachments thereto, is accurate, complete and true to the best of my knowledge. I understand that providing false information knowingly will disqualify me from consideration for New York State residency status.

Signature of Applicant

Sworn to before me this _____ day of _____, 200__

(Notary Public)

Section C

To be completed by the parent, custodial parent or guardian whom the student lives with or who will claim you as their dependent for income tax purposes.

Name: _____ Relationship: _____

Permanent Address: _____

Length of time at this address: _____ / _____ Telephone Number: (____) _____ - _____
Years Months (Attach copy of signed lease, deed or tax bills for last 12 months)

Previous address: _____

Citizenship: _____ U.S. _____ Other _____ If other, Visa type: _____

Please list states in which you filed or will file resident taxes during the last two (2) years and current year:
(Attach copy of most recent Federal and State Income Tax, including W-2 statements)

200____ State 200____ State 200____ State

Do you have a driver's license? Yes No If yes, in what state: _____

Date issued: _____ (Attach copy of driver's license)

Do you own a car? Yes No If yes, in what state: _____

Date issued: _____ (Attach copy of vehicle registration)

The following statement must be completed and notarized before a Notary Public:

Affirmation:

I hereby certify that the above applicant is applying with my knowledge for New York State residency status at SUNY Cortland.

Date ____ / ____ / ____ Signature: _____

STATE OF NEW YORK

COUNTY OF _____

I, _____, do hereby affirm that all the information provided on this form and any attachments thereto, is accurate, complete and true to the best of my knowledge.

Date: ____ / ____ / ____ Signature of Parent/Guardian: _____

Sworn to before me this _____ day of _____, 200__

(Notary Public)