This PETITION TO CHANGE RESIDENCY STATUS is designated for independent students. Different criteria are used for students applying for residency as a dependent of parents living in Arizona. STUDENTS CURRENTLY ATTENDING NAU AS WESTERN UNDERGRADUATE EXCHANGE STUDENTS (WUE), ARE NOT ELIGIBLE TO FILE A PETITION.

| **NEW OR TRANSFER STUDENT**  
**FALL 2016 term** 
Submit this petition by the deadline to:  
Office of Undergraduate Admissions  
Sechrist Resource Center  
Sechrist Hall Building 42  
P.O. Box 4084  
Flagstaff, AZ 86011-4084  
Phone: (928) 523-5511 | | **CONTINUING UNDERGRADUATE STUDENT**  
**FALL 2016 term** 
Submit this petition by the deadline to:  
Office of the Registrar  
Gammage Building 01, Room 112  
P.O. Box 4103  
Flagstaff, AZ 86011-4103  
Phone: (928) 523-5359 | | **GRADUATE STUDENT**  
Graduate students may submit petition prior to this date  
**FALL 2016 term** 
Submit this petition by the deadline to:  
Office of the Graduate College  
Ashurst/Old Main Building 11, Room 107  
624 S. Knoles Dr.  
Flagstaff, AZ 86011-4125  
Phone: (928) 523-5316 |

| *First Day to Submit Residency Petition*:  
16-week term courses and First 8-week courses  
All other session courses | Monday, July 5, 2016  
8 weeks prior to the start of the course |  
| *Deadline to Submit Residency Petition*:  
16-week term courses First 8-week courses  
All other session courses | Friday, September 9, 2016  
One calendar day after the course Add/Drop date |  
| *Deadline to File Reclassification Appeal*:  
16-week term courses First 8-week courses  
All other courses | Friday, October 7, 2016  
2 weeks after the deadline to submit petition |

- Failure to file a complete petition within the above prescribed time period is considered a waiver of the right to file for this term AND is **not a basis for appeal**.
- Normal processing time for completed petitions is **fifteen (15)** working days for the current term. If additional information is needed, the process may be delayed.
- **No extensions of payment deadlines are granted on the basis of unresolved residency status.** A refund of fees will be issued if necessary upon approval of residency.
- Denied students may appeal the decision to the Residency Appeals Committee (see above deadline). **Appeals received after the deadline will not be accepted.**
- **The burden of proof rests with the student.** Evidence must be submitted to support all responses given in this petition.
- **Students may only apply for residency and appeal any decisions once during a term.**

**INSTRUCTIONS**

1. Respond to all questions and statements.
2. Provide all requested documentation. Failure to do so may be interpreted as evidence of non-residency.
3. Notarize required documents (student and parents, if applicable).
4. Use the "Final Checklist" to make sure you have included all necessary documentation.
5. Submit this petition and required documentation to the appropriate office as indicated above.
6. Faxed petitions will not be accepted. Please use courier delivery due to confidentiality of documents.
All statements, requested information, and evidence provided with your petition packet must be consistent with those presented on other University/official documents and is subject to verification. Inconsistencies will jeopardize your case for residency. In addition, you may be subject to disciplinary action, dismissal/suspension from the University, repayment of tuition fraudulently waived, repayment of financial aid, or all of these.

GENERAL STATEMENTS

A. The State of Arizona funds Arizona institutions of higher education. Since non-resident students (and their families) generally have not contributed to the source of this funding of public education in Arizona, they are required to pay fees that more closely represent the actual cost of their education.

B. The rules and regulations for establishing residency for tuition purposes are defined by the Arizona Board of Regents, which is authorized by the Arizona Legislature and the state statutes (section A. R. S., 15-1801 through 1807) to provide classification for a tuition differential between resident and non-resident students.

C. An individual must establish residency in Arizona before he or she is entitled to pay resident tuition rates. The requirements to establish residency for tuition purposes are independent from those of other types of residency, such as voting or holding public office. Residency classification for tuition purposes is to be determined in accordance with the Arizona Law and Board Policy.

D. These regulations for residency apply to all public universities in the State of Arizona. Tuition classification as a resident at an Arizona community college does not mean that a student will be classified as a resident when transferring to a state-funded Arizona university.

E. All three requirements for residency as outlined in this petition must be met. Submit documentation from the three criteria along with your application.

DEFINITIONS

A. **Domicile**: An individual’s true, fixed, and permanent home and place of habitation. It is the place where the individual lives, intends to remain, and to which the individual intends to return when leaving without intending to establish a new domicile elsewhere.

B. **Domicile Year**: Evidence indicating intent must exist at the beginning of and be maintained throughout the 12 month period of continuous presence needed to establish residency classification. Acts of events occurring less than 12 months before the last day of registration may be considered as evidence of the lack of such intent.

C. **Parent(s)/Legal Guardian**: An individual’s father or mother, or the legal guardian of an unemancipated individual provided there is no evidence indicating that the guardianship was created primarily for the purpose of conferring the classification of resident on the individual.

RESIDENCY POLICIES ARE SUBJECT TO CHANGE WITHOUT NOTICE
**FINAL CHECKLIST - PROVIDE THE FOLLOWING DOCUMENTATION**

Evidence indicating intent must exist at the beginning of and be maintained throughout the 12 month period of continuous presence needed to establish residency classification. Acts or events occurring less than 12 months before the last day of registration may be considered as evidence of the lack of such intent.

### NOTARIZED DOCUMENTS

<table>
<thead>
<tr>
<th>Document Type</th>
<th>Description</th>
<th>Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affidavit of Declarations</td>
<td>To be signed by student in the presence of a Notary Public</td>
<td>☐</td>
</tr>
<tr>
<td>Parent’s Affidavit</td>
<td>Support of Financial Independence (students 24 years of age or younger)</td>
<td>☐</td>
</tr>
</tbody>
</table>

### REQUIREMENT #1 FOR RESIDENCY – PHYSICAL PRESENCE (submit following)

<table>
<thead>
<tr>
<th>Document Type</th>
<th>Description</th>
<th>Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proof of Employment in Arizona</td>
<td>- Pay stubs for 12 months <strong>AND</strong></td>
<td>☐</td>
</tr>
<tr>
<td>Proof of Permanent Address in Arizona</td>
<td>- Rent receipts, Lease agreement, <strong>OR</strong></td>
<td>☐</td>
</tr>
<tr>
<td>Proof of School Attendance in Arizona (other than NAU)</td>
<td>- Academic Transcripts <strong>AND</strong></td>
<td>☐</td>
</tr>
<tr>
<td>Letter signed by student explaining any gaps in 12 months continuous physical presence</td>
<td></td>
<td>☐</td>
</tr>
</tbody>
</table>

### REQUIREMENT #2 FOR RESIDENCY – INTENT TO ESTABLISH DOMICILE (submit following)

<table>
<thead>
<tr>
<th>Document Type</th>
<th>Description</th>
<th>Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arizona Driver’s License or AZ ID Card</td>
<td>– Please read page 7 of the application</td>
<td>☐</td>
</tr>
<tr>
<td>Arizona Motor Vehicle Registration</td>
<td></td>
<td>☐</td>
</tr>
<tr>
<td>Arizona Voter’s Registration</td>
<td>– Include photocopy of voter registration card</td>
<td>☐</td>
</tr>
<tr>
<td>Major Banking Services in Arizona</td>
<td>– Provide letter from bank showing when banking services were established <strong>OR</strong> include copy of bank statement which shows your name/AZ address and is dated at least 12 months prior to the start of the term in which you are petitioning for residency.</td>
<td>☐</td>
</tr>
<tr>
<td>State Income Taxes</td>
<td>– Provide copies for the last 2 tax years; must have an AZ state tax return for the past year; if this is your first year to file taxes with the state of Arizona, submit a letter of intent to file with state of Arizona.</td>
<td>☐</td>
</tr>
<tr>
<td>Federal Income Taxes</td>
<td>– Provide copies for the last 2 tax years; if you have not filed with an Arizona address, submit a letter of intent to file.</td>
<td>☐</td>
</tr>
<tr>
<td>Employment History</td>
<td></td>
<td>☐</td>
</tr>
<tr>
<td>Letter from employer assuring future employment in Arizona</td>
<td>(If applicable)</td>
<td>☐</td>
</tr>
<tr>
<td>Explanation of why you came to Arizona, why you wish to remain, and plans for the future.</td>
<td></td>
<td>☐</td>
</tr>
</tbody>
</table>

### REQUIREMENT #3 FOR RESIDENCY – FINANCIAL INDEPENDENCE (submit the following)

<table>
<thead>
<tr>
<th>Document Type</th>
<th>Description</th>
<th>Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pay Stubs or W-2 forms</td>
<td>for the past 24 months</td>
<td>☐</td>
</tr>
<tr>
<td>Tuition Costs for Out of State Schools</td>
<td>for the past 24 months (If applicable)</td>
<td>☐</td>
</tr>
<tr>
<td>Documentation of Financial Aid</td>
<td>for the past 24 months (If applicable)</td>
<td>☐</td>
</tr>
<tr>
<td>Veterans’ or Social Security Benefits</td>
<td>for the past 24 months (If applicable)</td>
<td>☐</td>
</tr>
<tr>
<td>Accident/Insurance Benefits</td>
<td>for the past 24 months</td>
<td>☐</td>
</tr>
<tr>
<td>Documented Inheritance</td>
<td></td>
<td>☐</td>
</tr>
<tr>
<td>Federal/State Income Taxes</td>
<td>for the past 2 tax years (also required for criteria #2 above)</td>
<td>☐</td>
</tr>
<tr>
<td>Parents’ Federal Income Taxes</td>
<td>for prior 2 tax years; for students age 24 or younger</td>
<td>☐</td>
</tr>
<tr>
<td>Letter from parent’s auto insurance provider stating that the applicant was not covered under parent’s insurance for the past 24 months.</td>
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<td>☐</td>
</tr>
</tbody>
</table>
INDIVIDUAL DATA

NAU ID # __________________________

☐ Undergraduate New/Transfer  ☐ Undergraduate  ☐ Graduate

Full Legal Name __________________________________________

E-mail Address __________________________________________

Complete Mailing Address __________________________________________

Street __________________________ City __________________________ State Zip __________________________

Phone Number (_______) __________________________ Date of Birth __________________________ Age __________________________

Place of Birth __________________________ Date/Location of High School Graduation __________________________

Are you a U.S. citizen?  ☐ Yes  ☐ No

If not, citizen of what country? __________________________________________ Visa type _______ and number __________________________

Are you a U.S. Permanent Resident?  ☐ Yes  ☐ No  If yes, date you filed your I-485: __________________________

(include a copy of the I-485 application).

Date Permanent Resident Status Granted: __________________________

(Include a copy of both sides of your resident alien card)

SPOUSE INFORMATION

Spouse Name: __________________________ Phone Number: __________________________ Date of Marriage: __________________________

Permanent Address: __________________________ Employer Name/Address __________________________

PARENT INFORMATION

( THE INFORMATION BELOW IS REQUIRED IF YOU ARE CURRENTLY AGE 24 OR YOUNGER)

FATHER’S INFORMATION:

Name: __________________________ Home Phone: (_______)

Permanent Address: __________________________

Employer Name & Address: __________________________

MOTHER’S INFORMATION:

Name: __________________________ Home Phone: (_______)

Permanent Address: __________________________

Employer Name & Address: __________________________

PARENT/SPOUSE/GUARDIAN TAX INFORMATION: (To be completed by all students)

Are you eligible to be claimed as a tax exemption by your parents, spouse or guardian?  ☐ Yes  ☐ No

What are the two most recent years you were claimed as a tax exemption? __________________________, __________________________

By whom, were you claimed?  ☐ Father  ☐ Mother  ☐ Spouse  ☐ Guardian

Student Signature __________________________ Date __________________________
How can I show that I have maintained CONTINUOUS PHYSICAL PRESENCE in Arizona for twelve months?

1. **Proof of Employment in Arizona:**
   Pay stubs or letters from employers can be submitted as evidence of continuous physical presence. All months employed should be accounted for. Pay stubs that do not clearly show your name, employer’s name, and the appropriate inclusive dates are **not** considered evidence. If pay stubs do not provide this information, a letter from the employer can be submitted. Such a letter should include your name, the address of the employer, the inclusive dates of employment, and the total amount earned during the domicile year on the company letterhead.

   **AND**

2. **Proof of Maintenance of Permanent Address in Arizona:**
   Rent receipts, escrow statements (if purchasing a home), leases, or cancelled checks for rent or house payments covering the entire 12-month domicile year can be offered as evidence of physical presence. Documents that do not clearly show your name, the address, and the appropriate inclusive dates are **not** considered evidence. Where receipts, checks, etc., do not provide this information, a letter from a landlord or rental agent can be submitted. Such letters should include your name, the address of the dwelling, and the inclusive dates of occupancy. Letters should be on company letterhead, signed and dated.

   **OR**

3. **Proof of School Attendance in Arizona:**
   If you were enrolled in an Arizona school, college, or university during the domicile year, your physical presence during regularly scheduled classes can be documented by providing school records such as grade slips or transcripts. *(In the case of attendance at NAU, you need not copy transcripts or grade reports; your records will be consulted to verify attendance.)* You must account for all non-class breaks, vacation periods, and summer.

   **AND**

4. **Absences:**
   All gaps in your continuous physical presence not documented by school attendance, permanent address, and/or employment must be explained in writing in a letter signed by you. Please include dates and reasons of all absence(s). Extended periods may require verifying documentation.
Please fill in the following worksheet to show your physical presence in Arizona.
My continuous stay in Arizona began on (date) ____________________________.

<table>
<thead>
<tr>
<th>DATE</th>
<th>PERMANENT ADDRESS (Physical Residence)</th>
<th>EMPLOYMENT (Employer/City)</th>
<th>SCHOOL ATTENDANCE (School/Location)</th>
<th>ABSENCES (List dates &amp; Location)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aug. 2015</td>
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<tr>
<td>Sep. 2015</td>
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<td>Oct. 2015</td>
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<td>Dec. 2015</td>
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<td>Feb. 2016</td>
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<tr>
<td>Mar. 2016</td>
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<td>Apr. 2016</td>
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<tr>
<td>May 2016</td>
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<td>Jun 2016</td>
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<td>Jul. 2016</td>
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<tr>
<td>Aug. 2015</td>
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<tr>
<td>Sep. 2016</td>
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<tr>
<td>Nov. 2016</td>
<td></td>
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</tbody>
</table>
Requirement #2 for Residency – Intent to Establish Domicile (Instructions)

Residency will not be granted until evidence is in place for 12 full months. A student must prove intent to establish a domicile in Arizona with the following documents:

A. Arizona driver’s license/Arizona ID card: If you hold a license in another state, failure to obtain an Arizona license is clear and convincing evidence of your intention to remain a non-resident of Arizona. In essence, you are maintaining your affiliation with the other state. State law requires that you obtain an Arizona driver license and registration immediately if any one of the following applies. If you:
   • All driver license and identification card holders to report any change of address to MVD within 10 days.
   • Work in Arizona (other than for seasonal agricultural work)
   • Are registered to vote in this state
   • You have place children in school without paying the tuition rate of a nonresident
   • You have a business with an office in Arizona, that bases and operates vehicles in this state
   • Obtain a state license or pay school tuition fees at the same rate as an Arizona resident
   • You have a business that operates vehicles to transport goods or passengers within Arizona
   • You remain in Arizona for a total of seven months or more during any calendar year, regardless of your permanent residence

B. Arizona motor vehicle registration and license plates: Under Arizona law, any vehicle not properly registered and licensed in the state (including motorcycles and motor scooters) is considered to be the property of a non-resident. Failure to properly register and license a motor vehicle that is operated in Arizona, whether or not it is registered in your name, is evidence your intention is to remain a non-resident of Arizona.

C. Filing of Arizona State income taxes: Filing an Arizona State tax return as a resident for all 12 months included in your domicile year is evidence of your intent to be considered a resident of Arizona. Payment of state income tax as a resident of any other state for any month of your domicile year is evidence of your intention to be considered a non-resident. An Arizona address should be listed on your tax returns. Lack of sufficient income to file state taxes will not affect your intent to become a resident but may weaken your case for financial independence. Documents provided should include an Arizona state tax return for the past year. If the upcoming year is your first time to file your taxes with the state of Arizona, submit a letter of intent to file with state of Arizona.

D. Filing of Federal Income Tax forms as an Arizona resident: The address used on your federal tax return forms for your domicile year will be considered an indication of your permanent place/state of residence. Using an Arizona address on federal forms is evidence of your intent to be considered a resident of Arizona; using an address in another state is evidence of your non-residency. If no federal tax was filed due to lack of sufficient income, your case for financial independence may be weakened. Provide copies for the last two tax years; if you have not filed with an Arizona address submit a letter of intent to file.

   A free transcript of Federal tax return may be obtained from the IRS by calling 1-800-829-0922. Arizona state income tax transcript can be obtained through the Arizona Department of Revenue by calling 602-255-3381.

E. Voter registration in Arizona: Registering to vote and voting is, of course, optional in our country. Registration to vote and voting in Arizona during your domicile year, however, is considered evidence of your intent to be considered a resident of the state. Voter registration and/or voting in another state during your domicile year are evidence of non-residency.

F. Submit a short letter as to why you (the applicant) came to Arizona and your plans for the future.
A. DRIVER'S LICENSE (include copies of both sides)

State ____________ License Number _________________ Date current license issued ________________

Is your current license a renewal of an AZ license? ☐ Yes ☐ No

If yes, indicate initial date of issue (provide MVD documentation) ____________________________________________________________________________

Arizona ID card - Date issued ____________ Number _______________________________________________________________________________________

B. MOTOR VEHICLE REGISTRATION: (include copy of Arizona Motor Vehicle Title verifying date of registration)

Please submit copy of registration.

Do you own a motor vehicle in Arizona? ☐ Yes ☐ No  Do you operate a motor vehicle in Arizona? ☐ Yes ☐ No

Name of registered owner ______________________________________________________________________________________

State of residence ________________________ Relationship to you ____________________________

AZ license plate number ____________________ Date purchased by you ____________________________

Date of current AZ registration ______________ Date of original AZ registration ________________

C. TAX INFORMATION: Provide copies of your Federal and State Tax Forms with W-2 forms for the last two years. For the current calendar year, include your most recent pay stubs showing earnings and Arizona withholding. IF YOU DID NOT FILE STATE AND/OR FEDERAL TAXES DURING THE PAST TWO YEARS, GIVE A COMPLETE EXPLANATION AND A LETTER OF INTENT TO FILE FOR UPCOMING TAX YEAR.

D. VOTER REGISTRATION: (Include photocopy of registration card)

Date Registered __________________________ Precinct/City/State ________________________________

Date most recently voted ____________________ State most recently voted ________________________

☐ I am currently not registered to vote in any state.  ☐ I have not voted in any state within the last 12 months.

E. SUBMIT A SHORT LETTER AS TO WHY YOU (THE APPLICANT) CAME TO ARIZONA AND YOUR PLANS FOR THE FUTURE.

F. BANK ACCOUNTS IN ARIZONA: Dates established: ______________(Include Letter of Verification from bank)

G. MILITARY RECORDS (If Applicable) Provide documentation showing Arizona as home of record and Leave and Earnings Statement showing Arizona State taxes withheld on earnings. Dates of service: ________________.

H. FINANCIAL AID APPLICATION: FAFSA (if applicable) showing Arizona as state of residency

I. ASSURED FUTURE EMPLOYMENT IN ARIZONA (If Applicable) (i.e. Employment contract).
   Include supporting letter or document.

Make sure copies of all documents are included before submitting materials.
Page 10 of the petition (Financial Independence – worksheet) is used to determine how the individual has supported him/herself for the past 24-month period. An individual applying for classification as a resident must prove that he/she was financially independent for 24 months immediately preceding the request for residency classification. An individual is considered to be financially independent if he/she meets the following requirements:

1. The applicant was **self-supporting** for the 24 months immediately preceding the request for residency classification. Provide evidence that you were financially independent on the following worksheet.

2. The applicant was **not claimed as a tax dependent** by out-of-state parents for the **two tax years** immediately preceding the request for residency classification.

3. The applicant did not receive any **financial support** from parent(s), guardians, or others for the same 24 months.

4. The applicant was not dependent on the parents for **housing costs and auto insurance** for the same 24 months.

On page 10, fill in each category for each time period. The following definitions are listed for your assistance:

**EMPLOYMENT**: List earnings generated from the student’s employment. Documentation of such earnings can be shown with a W-2, end year tax forms, or check stubs.

**PARENTS/GUARDIANS**: List any financial support received from parents, relatives, or guardians.

**SPOUSE**: List any financial support received from the spouse from the point in time you were legally married.

**FINANCIAL AID**: List here financial aid received for the appropriate term. Include documentation of the awards. **PLUS LOANS** will automatically disqualify a student from being considered independent.

**SCHOLARSHIPS**: List here any scholarships received for the appropriate term. Include documentation of the award.

**TRUST FUNDS**: List here the amount of withdrawals from the trust fund used to support the individual during the appropriate time period. Please **DO NOT** list the value of the trust. See page 11 of the petition for further information regarding trust funds. Provide requested documentation.

**OTHER**: List any other source of income used to support the student during the appropriate time period. Provide documentation that the student was the source of the income.

**TOTAL INCOME**: Total the above income sources in this box.

**TUITION COSTS**: For the given terms, indicate the tuition cost paid. If the student was not enrolled at any institution, indicate tuition cost were zero (0) dollars.

**TOTAL EXPENSES**: Add the above tuition cost for the given time periods plus living expenses (see chart below). It is assumed that any one individual would need at least $8000 to pay housing, food, heat, clothes, etc. for one year. Depending on the term you are applying for residency, the prior 24 months may not be full year periods. If that is the case, the $8000 will be prorated.

<table>
<thead>
<tr>
<th>Year</th>
<th>Add</th>
<th>Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015 (one full calendar year)</td>
<td>$8000</td>
<td>12</td>
</tr>
<tr>
<td>2016 (one full calendar year)</td>
<td>$8000</td>
<td>12</td>
</tr>
</tbody>
</table>

**NOTE**: Parent **PLUS** loans, co-sign loans, credit cards, and gifts are **NOT** accepted as earnings of self support. Auto insurance policy **must** be separate from parents for 24 months immediately preceding the request for residency classification.
YOU MUST PROVIDE DOCUMENTATION FOR EACH ENTRY - ALL STUDENTS MUST COMPLETE THIS FORM
Fill in the dollar amount for each category of earnings for each time period and total.

<table>
<thead>
<tr>
<th>SOURCE OF SUPPORT DURING YEAR</th>
<th>DOLLAR AMOUNT</th>
<th>DOLLAR AMOUNT</th>
</tr>
</thead>
</table>
| EMPLOYMENT  
(Supply a copy of taxes, pay stubs or W-2 forms) | $ | $ |
| PARENTS/RELATIVES/GUARDIAN(S) | $ | $ |
| SPOUSE (not fiancé) | $ | $ |
| FINANCIAL AID  
(List by Name) | $ | $ |
| SCHOLARSHIP(S)  
(List by Name) | $ | $ |
| TRUST FUND  
(see page #12 also) | $ | $ |
| OTHER (Please specify) | $ | $ |
| TOTAL INCOME  
(Total your above income here.) | $ | $ |

<table>
<thead>
<tr>
<th>TUITION COST PER TERM™</th>
<th>Spring 2015</th>
<th>Spring 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spring 2015</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Fall 2015</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

TOTAL EXPENSES FOR 2015 - Total your tuition costs (above) and add $8000 for living expenses here. +______ + 8000

TOTAL EXPENSES FOR 2016 - Total your tuition costs (above) and add $8000 for living expenses here. +______ + 8000

TOTAL INCOME MUST EXCEED TOTAL EXPENSES TO BE CONSIDERED FINANCIALLY INDEPENDENT
TRUST/INVESTMENTS (If applicable)

PROOF OF TRUST FUNDS:
1. Name and location of financial institution in which trust fund is maintained.
2. Trust Agreement or a description of duration of trust (i.e., dates established, length of trust agreement).
3. Description of source of funds such as grandmother’s estate, parental savings, etc.
4. Tax forms from the appropriate years showing interest or dividend income.
5. History of accounts listing deposits and withdrawals during the last 24 months. Include evidence that withdrawals were made to meet educational expenses.
6. If applicable, a statement explaining why the fund is not banked in Arizona.
   Account should be in student’s name or jointly with parent as custodian or trustee.

Name: ___________________________________________   ID #: __________________________

I, _____________________________, as the income beneficiary of my trust/investment account, authorize the administrator of my trust/investment account to release the following information and documentation to NORTHERN ARIZONA UNIVERSITY, Residency Classification Section, concerning the disbursement of funds. I also waive my rights of privacy under the Family Education Rights and Privacy Act for the purpose of discussing my file with my trustee.

1. Date trust/investment account was established? ______________________________
   Provide a copy of the original documentation establishing the trust.

2. Name, address, and telephone number of administrator or trustee, if applicable:

   Name  Address  City  State  Zip
   __________________________  __________________________  __________________________

   Telephone: (_________) __________________________

3. Name and address, and telephone number of financial institution in which trust fund is maintained:

   Name  Address  City  State  Zip
   __________________________  __________________________  __________________________

   Telephone: (_________) __________________________

4. Who is responsible for filing taxes on the trust? ______________________________

5. Who is responsible for paying the taxes on the trust/investments?
   □ Beneficiary   □ Trust
   Provide copies of the federal and state tax forms for the prior 24 months.

I certify that the foregoing statements regarding my trust/investment accounts are correct. I understand that providing false or misleading statements concerning domicile shall be cause for dismissal from the University.

_________________________________________   __________________________
Student Signature   Date

11/9/2015
PARENT’S AFFIDAVIT

- If you are 24 years of age or younger at the time you complete this petition, your parents must complete the affidavit below and have it notarized.

- If parents are divorced, the affidavit must be copied and completed by both parents individually.

- Both parents must submit completed Federal Tax Forms for 2015 and 2016, and letters from their insurance providers stating that the applicant was not covered for auto insurance in 2015 and 2016.

- Do not complete if married (student) for the two tax years.

Dear Parents:

1. Have you or will you claim the applicant as an exemption for Federal income tax purposes?
   - 2014 Yes No
   - 2015 Yes No
   - 2016 Yes No

2. Have you provided any financial support to the applicant for the calendar years?
   - 2014 Yes No
   - 2015 Yes No
   - 2016 Yes No

3. Did you provide health insurance coverage for the applicant during?
   - 2014 Yes No
   - 2015 Yes No
   - 2016 Yes No

4. Did you provide auto insurance coverage for the applicant during?
   - 2014 Yes No
   - 2015 Yes No
   - 2016 Yes No

All statements, information, and evidence presented are true and complete. I understand that inconsistencies in statements, information and evidence that I have presented in this Parent’s Affidavit, as well as any effort on my son/daughters part to fraudulently claim Arizona as his/her state of legal domicile, will jeopardize his/her case for residency and subject him/her to disciplinary action including dismissal from the University, repayment of tuition fraudulently waived, repayment of financial aid fraudulently obtained, and may result in civil and criminal liability. I hereby grant permission for NAU representatives to verify any information provided.

__________________________________________

__________________________

Mother’s Name

__________________________________________

__________________________

Father’s Name

__________________________________________

Date

Signature of Mother

__________________________________________

Date

Signature of Father

State of ____________________________ County of ____________________________

Signed before me this ___________ day of ____________________________, 20________

Signature of Notary Public: ____________________________________________

My Commission Expires: ____________________________________________
AFFIDAVIT OF DECLARATIONS

No application for residency reclassification will be considered unless this form is properly signed, dated, and notarized.

I, the undersigned, declare the following:

1. All statements, information, and evidence presented in and with this Petition for Change of Residency Classification are true and to the best of my knowledge consistent with the statements, information, and evidence I have presented elsewhere on NAU documents and other official documents;

2. I renounce all claims to residency in any state other than Arizona, I further declare Arizona to be my state of legal domicile not only for residency status for tuition purposes, but for all other purposes as well;

3. I understand that inconsistencies in statements, information, and evidence that I have presented in my Petition to Change Residency Status and any other effort on my part to fraudulently claim Arizona as my state of legal domicile, will jeopardize my case for residency and subject me to disciplinary action, dismissal/suspension from the University, repayment of tuition fraudulently waived, repayment of financial aid fraudulently obtained, or all of these;

4. I hereby grant permission for NAU representatives to verify any supporting evidence submitted with this petition.

Signature (sign in the presence of a Notary Public) __________________________________________

State of __________________________________________ County of _____________________________

Signed before me this ________________ day of _____________________, 20________

Signature of Notary Public: _____________________________________________________________

My Commission Expires: _______________________________________________________________