

BASIC RESIDENCE QUESTIONNAIRE SUPPLEMENT

				SSN or SCCID#
(Please Print)	Last	First	М	
DATE OF BIRTH	4		PHONE	#

Unless you have been a resident of California for at least one year and one day prior to the beginning of the semester you wish to enroll in, you must pay non-resident tuition. Please complete this questionnaire if you would like your residency status to be re-evaluated.

Attach proof of intent to become a resident (i.e., rent receipts - to prove most recent day present stay began in California, leave and earnings statements if active duty military, driver's license, vehicle registration and most recent California 540 tax form.)

PARTI (To be completed by all students)

- A. Date your present stay began in California _____
- B. List where last two state income tax returns were filed and year covered by each (attach copy of most recent state income tax return)

	State If no taxes were filed, explai	Year n:	State	Year			
C.	From what state do you have any of the following?						
	Driver's License	State					
	Vehicle Registration						
	Registered to Vote	State					
	Other Proof of Residency	in California:					
D. PAR	Are you unmarried and un (If YES, complete Part III co		YESNC)			
	re you an active member of t		YES	NO			
3. Ai	re you a dependent of an act	ive duty military person?	YES	NO			
	/hat is your or your sponsors ecords?	s' (spouse or parents if mili		legal residence on military			

Active Duty Military: Attach a copy of your most recent LES (Leave and Earnings statement) and an LES from one year ago.

SEE REVERSE SIDE - COMPLETE INFORMATION ON BACK OF THIS SHEET.

PART III (To be completed about your parents if you are unmarried and under 19 years old)

Α.	I have lived continuously for the past two (2) years with one or both of my parents and he/she/they have lived continuously for the past two (2) years at the California address noted below.						
	YES	NO	lf YES , check	one: Both parents	Mother	Father	
	Names (s) Address						
			City/S	tate/Zip			
В.	List where parents' last two state income tax returns were filed and year covered by each (attach copy of parents most recent state income tax return.)						
	State		Year				
	State		Year	Year			
If no ta	xes were filed, expl	ain:					
Do yo ι	ır parents have an	y of the following: <u>FATH</u>	IER	MOTHER			
Driver's	s License	State:		State:			
Vehicle	Registration	State:		State:			
Registe	ered to Vote	State:		State:			
Other I	Proof of Residenc	y in California:					

* * * ALL STUDENTS * * *

I declare under penalty of perjury that the statements submitted by me in connection with the determination of my residency are true and correct, and I will notify the Office of Admissions and Records if there is any change in any of the facts regarding my residency.

Executed at:	 	 	
Date:	 	 	

Student's Signature: _____