

Office of the Registrar

202 Thompson Center • 601 S Martin Luther King Jr. Drive Winston-Salem, North Carolina 27110 Phone: 336-750-3330 • Fax: 336-750-3332

For Office Use Only				
Approved	Denied			
Date	Initial			

NC Residence and Tuition Status Reclassification Application

IMPORTANT- Please read all instructions before completing this form

1) This reclassification application must be completed to assist in determining if you are eligible for in-state tuition. North Carolina Statute (G.S. 116-143.1) requires that, "To qualify as a resident for tuition purposes, a person must have established legal residence (domicile) in North Carolina and maintained that legal residence for at least 12 consecutive months immediately prior to his or her classification as resident for tuition purposes." G.S. 116-143.1 also sets forth statutory definitions, rules, and provisions including special rules with respect to persons who are married, individuals identified within specific subclasses of minors, certain active-duty military service members and their dependents, NC National Guard and non-U.S. citizens who may also qualify for resident tuition status. Consult the North Carolina State Residence Classification Manual to become familiar with these statutory and regulatory conditions.

Any residency reclassification application submitted without meeting the following criteria will be returned to the student.

2) Apply for only one term per application. No change in residency status may be obtained for an academic term that has ended. North Carolina residency requirements can be found on the

Office of the Registrar website -- NC Residency page.

- 3) **Respond to all questions** If a question does not apply to your situation, write "not applicable" or "N/A."
- 4) **Print legibly in dark ink or type all responses**. Do not complete your application using a pencil. If additional space is required to write your responses, use separate sheets of paper, numbering them the same as the question being answered. Attach these sheets to the application form.
- 5) **Be completely accurate** to the best of your knowledge and understanding. Knowingly falsifying your responses may subject you to disciplinary action, including dismissal from the institution. When a date is requested, give month, day, and year.
- 6) Attach the documentation listed on page 4 to support your claim that you are a North Carolina resident for tuition purposes.
- 7) **Sign and date** where indicated on page 4. An application submitted without being signed does not constitute a legal document.

1.	Full name: E-mail address
2.	
If	Are you currently enrolled at Winston-Salem State University? Yes No f no , have you been admitted to a future term? Yes No Check the term and indicate the year in which you want this decision to apply:
	Fall Spring Summer I Summer II Year 20
4.	Date of birth: Place of birth (city, state, country):
5.	Are you a U.S. Citizen? Yes No If no, complete the Non-U.S. Citizen form in addition to the Residence and Tuition Application provided on the Office of the Registrar's web page. If you are a naturalized U.S. citizen, attach a copy of your citizenship document or U. S. Passport to this application.
6.	When and from what state or foreign country did you move your home and legal residence to North Carolina?
	Moved fromDate/
7.	Why and when did you move your home to North Carolina?
	ReasonDate/
8.	Current address (street, city, state, zip):
	Since/ Telephone:/
9.	Permanent home address (street, city, state, zip):
	Since/ Telephone:/
10.	Previous home address in NC:

11.	Last previous home address out	side NC:						
	From//	to		/				
12.	Has your residence status for tui	tion purposes h	oeen pr	eviously (determined by	a North Carolina pu	blic educational institution?	
	Yes No If yes, (A	Name of instit	ution:	,	•	•		
		Classification:						
	(0)	Last term and	year yo	u were so	Classified.		 -	
13.	List all the places you have spent at least seven (7) cons Include your current address and all other places you have Address (street, city, state)					_	= =	
14.	Secondary (high or preparatory) School name	school(s) atten	ded, ind	_	nis one. Begin v Address (city,		school attended. Dates attended (From/To)	
a)								
b)								
c)								
a) b) c)	School name				s (city, state)		Dates attended (From/To)	
16.	List employment for wages in th	e last twenty-fo	our (24)	months,	latest first:			
a)	Employer		City		State	From/To	Hours/Week	
b)	Employer		City		State	From/To	Hours/Week	
c)	Employer		City		State	From/To	Hours/Week	
17.	List the sources and uses of the	money required	d to med	et all of y	our expenses:	Total percentage in	each year must equal 100%.	
	Source Current Calen		Calend	dar Year Prece		Precedir	eding Calendar Year	
	Your (student's) earnings Your savings Loans/grants/scholarships	% of Total			ed for		Used for	
	Parents or Legal Guardian				_			
	Name Trust/college fund							
	Other (specify)							
	Total	100%			-	100%		
18.	Did you claim yourself as an exe If Yes , in what state(s) were	•				•	s tax year? Yes No	
	If No , who did?	Relationship to you			you	Filed in what State(s)		

If r	No , who does?	Relationship to	you	_ Filed in what Stat	:e(s)	
. For wh	hich tax year did you last file a	state income tax return?	In what state or fo	oreign country?		
	this was a NC return, did you s If yes , for what period of time			the tax year?]Yes	☐ No
	e state income taxes being wit If yes , in which state or foreign		ring the current tax year	? Yes No	0	
. Where	e and on what date did YOU la	ast do any of the following?	Provide month, day, and	– year. If never done,	write I	VEVER.
		State	or Foreign Country	Mo	nth/Da	y/Year
	a. Registered to vote					
	b. Served on jury duty				/	/
	c. Acquired or renewed a dr d. Listed personal property f	river's license for taxation				/ /
`						
6	e. Registered/licensed a mo					
	Type of vehicle (lis	•	Where registered/lice		nth/ Da	y /Year
					/	<u>/</u> /
					/	
1	Owner's address: Name of the insurer:		Insured in			
ا List th jewelr	Name of the insurer: e addresses at which you owr ry, appliances, etc.) and give th	n and maintain personal prop	Insured in Insured in	n what state? cars, boats, savings	accour	nts, pets,
ا List th .	Name of the insurer: e addresses at which you owr ry, appliances, etc.) and give th	n and maintain personal prop	Insured in Insured in	n what state? cars, boats, savings	accour Total pe	nts, pets, ercentage
ا List th jewelr	Name of the insurer: e addresses at which you owr ry, appliances, etc.) and give th	n and maintain personal prop ne percentage of your total pe	Insured in Insured in	n what state? cars, boats, savings ed at each address.	accour Total pe	nts, pets, ercentage
List th jewelr equal	Name of the insurer:e addresses at which you owrry, appliances, etc.) and give the 100%.	n and maintain personal prop ne percentage of your total pe Address	Insured insured insured insured inserty (clothing, furniture, rsonal property maintains	n what state? cars, boats, savings ed at each address. % At Th	accour Total pe	nts, pets, ercentage
List th jewelr equal	Name of the insurer:e addresses at which you owrry, appliances, etc.) and give the 100%.	and maintain personal proper percentage of your total properties.	Insured in	n what state? cars, boats, savings ed at each address. ' % At Th	accour Total pe	ress
List th jewelr equal PAREI Father	Name of the insurer:e addresses at which you owr ry, appliances, etc.) and give the 100%. NT'S INFORMATION: r living? Yes No Nam	n and maintain personal prop ie percentage of your total pe Address ne :y, state):	Insured in	n what state?	accour Total pe nis Addi	ress
List th jewelr equal PAREN Father Perma	Name of the insurer:e addresses at which you owrry, appliances, etc.) and give the 100%. NT'S INFORMATION: r living? Yes No Name anent home address (street, citem of the control of the c	and maintain personal proper percentage of your total percentage of you	Insured in	n what state?	accour Total pe nis Addi	ress
. List th jewelr equal	Name of the insurer:e addresses at which you owr ry, appliances, etc.) and give the 100%. NT'S INFORMATION: r living? Yes No Name and home address (street, cit hone:	and maintain personal proper percentage of your total percentage of you	Insured in	n what state?	accour Total pe nis Addi	ress
PAREN Father Perma Teleph Emplo	Name of the insurer:e addresses at which you owr ry, appliances, etc.) and give the 100%. NT'S INFORMATION: r living? Yes No Name anent home address (street, cite hone: byer's address (city, state):	and maintain personal proper percentage of your total percentage of you	Insured in lerty (clothing, furniture, rsonal property maintain left)	n what state?	accour Total pe nis Addi	ress
PARENT Father Employ Are you	Name of the insurer:e addresses at which you owr ry, appliances, etc.) and give the 100%. NT'S INFORMATION: r living? Yes No Name anent home address (street, cit hone: byer's address (city, state): bur parents separated or divolute.	and maintain personal proper percentage of your total percentage of you	Insured in learning the learning that is the learning that it is the learning that it is the learning that it is the learning that is the learning that it is the learning	sh what state?	accour Total pe nis Addi	ress
Perma	Name of the insurer:e addresses at which you own ry, appliances, etc.) and give the 100%. NT'S INFORMATION: r living? Yes No Name address (street, cite none:	and maintain personal proper percentage of your total percentage of you	Insured in lerty (clothing, furniture, rsonal property maintain left)	what state?	accour Total pe	ress
. List th jewelr equal . PARENTE Father Permante Employ Are you Mother Permante Teleph	Name of the insurer:e addresses at which you owr ry, appliances, etc.) and give the 100%. NT'S INFORMATION: r living? Yes No Name and home address (street, cite none: over's address (city, state): over parents separated or divorcer living? Yes No Name or living?	and maintain personal proper percentage of your total percentage of you	Insured in lerty (clothing, furniture, rsonal property maintain left)	what state?	accour Total pe	ress
List th jewelr equal PARENT Father Permant Teleph Are you Mother Permant Teleph Employed Emp	Name of the insurer:e addresses at which you owr ry, appliances, etc.) and give the 100%. NT'S INFORMATION: r living? Yes No Name anent home address (street, cite hone: over's address (city, state): over green the separated or divorcer living? Yes No Name anent home address (street, cite hone: the sequence of the seq	and maintain personal proper percentage of your total percentage of you	Insured in lerty (clothing, furniture, rsonal property maintain left)	since:	accour Total pe	ress / / /
List th jewelr equal PARENT Father Permant Teleph Are you Mother Employed Are you Do you	Name of the insurer:e addresses at which you owr ry, appliances, etc.) and give the 100%. NT'S INFORMATION: r living? Yes No Name and home address (street, cit mone:	and maintain personal proper percentage of your total percentage of you	Insured in lerty (clothing, furniture, rsonal property maintain set) and custody es, who has/had custody	since: Since: Employed since: Since: of children? Since: of children?	accour Total pe	ress / / /

ГС	ermanent home address (street, city, state):		
Sir	nce:/ Telephone:	Employer:	
En	nployer's address (city, state):	Employed since:	_/
onths Y	u currently living with a person(s) who contributes to your following for each such person. Ses No If yes , answer the following for each such person. Name: Relationship	Answer for only one adult at each address.	hin the
a.	Permanent address (street, city, state):		
	Last previous address (street, city, state):		
	Employer:		
			:h/Day/
Ac	equired or renewed driver's license		/
Lis	sted personal property for taxation		//
Ac	cquired principal dwelling		/
Re	egistered/licensed motor vehicle(s)		/
Fil	– led state income tax return		/
a.	Have you, your spouse, or either of your parents been in act employment within the past two years? Name: Home address upon entry: Official home of record: Official home address now:		
	Date this home address was declared: Legal residence most recently claimed on DD form 2058 (State		
	Date that DD Form 2058 was completed:	- · · · · · · · · · · · · · · · · · · ·	
	State for which income tax withheld:		
	State for which income tax withheld: Home address upon discharge:		
	Home address upon discharge:	Date of discharge:	
	Home address upon discharge: Place to which mileage was paid upon discharge:	Date of discharge:	
	Home address upon discharge:	Date of discharge:	iod and

с.		lational Guard. Do you believe you qualify for this benefit? itary Tuition Benefits for National Guard Personnel form	
26. SPECIAL	GROUPS:		
b.		rgency worker who served in North Carolina? Yes No. Members of Deceased or Disabled Emergency Workers form	
С.	Are you a North Carolina public school teacher seeking in professional development? Yes No If yes, complete Certification and Professional Development form provided	ete and submit the In-state Tuition for North Carolina Teach e	er
If the determinant of the determ	nat all the information I have given on this application is cor, accurate, and truthful information on this application will	t giving a description of each and specifying places and dates mplete and correct. I understand my failure to provide be grounds to deny my application for North Carolina University may verify information provided, but may divulge	
Applicant'	's signature	Date signed	
Parent or g	guardian signature (If applicant is under 18 years of age.)	Date signed	

THE FOLLOWING DOCUMENTATION IS REQUIRED WITH ALL RESIDENCY APPLICATIONS

Once your residency reclassification has been determined, <u>you will not be able to introduce additional</u> <u>documentation</u> for consideration should you be denied residency and wish to appeal the decision.

If you are basing your intent to establish North Carolina as your bona fide permanent residence for tuition purposes on <u>your</u> residentiary acts, attach copies of the following:

Current driver's license, voter registration, vehicle registration, most recent Federal and State income tax returns and W-2s; most recent paycheck stub (if more than one employer in current year, provide final stub from each); lease(s) and/or home purchase agreement (with signatures) where your permanent residence was maintained for the 12 months preceding the term of school for which you are applying.

If you are basing your intent to establish North Carolina as your bona fide permanent residence for tuition purposes based in part on <u>your parents'</u> residentiary acts, attach copies of the following (in addition to your information above):

Parents' residentiary acts as listed above for the student. If relocation to the State was due to parents' employment, provide verification of the date of hire or transfer and first day of employment in North Carolina.

Where to submit your Residence and Tuition Status Application

Office of the Registrar
Winston-Salem State University
202 Thompson Center
601 S. Martin Luther King Jr. Dr.
Winston-Salem, NC 27110