



EXPRESS APPLICATION

for New York State Residency for Tuition Billing Purposes

IMPORTANT

This application should be used only if at least one of the following circumstances have been met:

- 1) *You have attended an approved New York State high school for two or more years, graduated from an approved New York State high school and applied for admission to the University within five years of receiving a New York State high school diploma;*

OR

- 2) *You have attended an approved New York State program for a General Equivalency Diploma (GED) exam preparation, received a GED/TASC and applied for admission to the University within five years of receiving the GED.*

All others should complete the full Application for New York State Residency for Tuition Billing Purposes, online at: https://www.brockport.edu/support/student_accounts/nys-tuition-status/index.html

Deadline for Submission: The application **must** be received by Office of Student Accounts no later than the last day of the semester late add period. Failure to submit an application by the deadline will result in full liability for tuition at the non-resident tuition rate. Applications submitted after the deadline may be considered for the following term. Supporting documentation must be for a period of 12 months or more prior to the start of the term for which you are applying for NYS residency status.

Application and Copies of Required Documents should be mailed to: The Office of Student Accounts, Attn: Residency Officer, 350 New Campus Drive, Brockport, NY 14420. For assistance, call (585) 395-2473.

Part I (must be completed by ALL applicants)

| | | |
|---|-------------------|---------------------------|
| 1. Term for which you are applying for NYS Residency (please indicate term and year, e.g., Fall 2012) | | |
| Fall _____ | Winter _____ | Spring _____ Summer _____ |
| 2. Name: _____ | | |
| Last | First | MI |
| 3. Brockport E-Mail Address: | Telephone Number: | |
| 4. Brockport Student ID #: 800 _____ | Date of Birth: | Marital Status: |
| 5. Are you applying due to a TAP residency review? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 6. Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Are you a Naturalized Citizen of the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach copy of your certificate)</i> | | |
| If you are not a citizen, are you a permanent resident alien? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach copy of your card)</i> | | |
| Are you in the United States on a visa? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach copy of your visa)</i> | | |
| Are you an undocumented alien? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If yes, attach expired visa and complete affidavit below)</i> | | |

7. Did you attend a New York State high school for two or more years **and** graduate from that school? Yes No

If yes, high school name & address: _____

Period of attendance: From: _____ To: _____ Graduation Date: _____

IMPORTANT: You MUST attach a copy of your official, FINAL, high school transcript with this application

8. Did you attend an approved New York State program for a General Equivalency Diploma (GED) exam preparation, and receive a GED/TASC issued by New York State? Yes – Date Issued: _____ No

IMPORTANT: You MUST attach official evidence of your GED/TASC with this application

STOP! Applicant Affirmation – To Be Completed Before a Notary Public

STATE OF NEW YORK, COUNTY OF _____ SS:

I, _____, the applicant herein, being duly sworn, do hereby affirm that all information provided on this form and any attachments thereto, is accurate, complete and true to the best of my knowledge. I understand that knowingly providing false information will disqualify me from residency status for tuition billing purposes and render this application null and void.

Signature of Applicant: _____

Sworn to before me this
_____ Day of _____, 20_____

(Notary Public)

Affix Notary Stamp here

**THIS SECTION IS TO BE COMPLETED ONLY BY STUDENTS WHO DO NOT CURRENTLY HOLD LAWFUL IMMIGRATION STATUS
*This Affidavit Must Be Completed Before a Notary Public***

STATE OF NEW YORK, COUNTY OF _____ SS:

I, _____, being duly sworn, depose and say that I do not currently have lawful immigration status but have filed an application to legalize my immigration status or will file such an application as soon as I am eligible to do so.

Signature of Applicant: _____

Sworn to before me this
_____ Day of _____, 20_____

(Notary Public)

Affix Notary Stamp here

Office Use Only

Application Denied Approved By: _____
Signature of College Residency Officer

Effective Term: _____ Date Approved/Denied: _____

Decision Letter mailed to student by: _____ Date: _____

**If applicable, date copy of U.S. Permanent Resident Card, U.S. Certificate of Citizenship/
Naturalization or foreign visa provided to:**

International Student Services Office _____ Registration and Records _____

Banner Updates:

SFAREGS adjusted by: _____ Date: _____

TSAAREV comment entered by: _____ Date: _____

Residency Spreadsheet updated: _____ **Financial Aid Notified:** _____
(if applicable)

Revised 02/08/17