











other documentation reflecting your visa type or current status.



Rε		ite:	Effective Term:	Resident	□ Non-
R.	esident esidence Classification Officer:				
	3 33				
LV	otes <u>:</u>				
	Resi		mation Affidavi	t	
€(ction 1: Applicant Backgrou	, _	int or type)		
m	ne (print)		Phone ()	
se	ent Mailing Address		City	State	Zip
	il				-
rm	nanent Mailing Address		City	State	7;4
	Date of Birth				Zip
	If "yes," indicate term Where and when did you graduate from him When did your most recent continuous sta	gh school? City/State			
	Since your most recent continuous stay in			-	
	Yes No	oregon began, have you			
			Name of Institution	Term Year	Hours
	If you answered "yes" to question 5, please institution(s), term, year and hours of enro provided.				
	(Attach additional pages if necessary)				
		college or university			
	Have you <i>ever</i> paid in-state tuition at a public (including community college)? Yes	□ No			
	, ,	□ No			
	(including community college)? ☐ Yes	☐ No and dates of attendance.			
	(including community college)? ☐ Yes ☐ If "yes" to question 7, please indicate where	No No and dates of attendance.	Location		
	(including community college)? ☐ Yes If "yes" to question 7, please indicate where From to Name of inst	No and dates of attendance. itution itution ion institution as a Natio	Location Location nal Exchange, WICHE/WUE, or	r Reciprocity student?	

	Have you received financial assistance from a state or govern Yes No If "yes," indicate state, agency, and explain	_	ency (other	than Federal Financial Aid) during the past 12 months?			
	Will you be receiving such assistance during the next 12 months? \(\subseteq \text{Yes} \) \(\subseteq \text{No} \) If "yes," indicate state, agency, type of assistance, disbursement date, and explain:						
	List totals of your expenses and financial resources for the past 12 months:						
	 a. Expenses: Total Expenses: (includes rent/mortgage, utilities, car payment, insurance, gas, groceries, spending money, etc.) b. Financial Resources: 						
	Self –Support: (includes wages, salary, commission, unemployment benefits, alimony, etc.			Identify source(s):			
	Support from parent, guardian or other person not including spouse: (includes room and board, tuition assistance, other general monetary support)	\$		Identify relationship:			
	Support received from federal or state financial aid:	\$		Identify type of aid:			
	Other sources of support: (includes spousal income, gifts, loans, savings, inheritance, trusts, stocks, VA	\$		Identify specific source(s):			
	benefits)						
	Are you applying for resident status as a dependent student whose parent, legal custodian, or other person upon whom you are dependent, has maintained a bona fide domicile in the State of Oregon for the past year? Yes No		submit : (a) A tr	stantiate your financial independence, you are required to appropriate documentation: rue and correct copy of your state and federal income tax rms* for the tax year immediately prior to the year in which application is made. If you did not file state and federal			
	If "yes," your parent, legal custodian, or other person u whom you are dependent, must complete Section 3 of form providing proof of his/her Oregon domicile. Verification of your dependent status must be document.	this	inco doc	income tax returns because of minimal or no taxable income, documented information concerning the receipt of such nontaxable income must be submitted.			
	submitting a true and correct copy of that person's state and federal income tax returns (top portion listing exemptions and signature section only)* for the most recent tax year.		(b) A true and correct copy of your W2 form filed for the previous tax year.				
	Are you applying for resident status as a financially indepen student? Yes No If "yes," you must complete the remainder of this form.	(c)		Other documented financial resources. Such other resources may include, but are not limited to, the sale of personal or real property, inheritance, trust fund, state or financial assistance, gifts, loans, earnings, or savings of the spouse of a married student.			
	Student's sworn statement: By signing this affidavit (see "Final Steps" section) as an independent student, I swear that I will not be claimed as a dependent for federal and state income tax purposes by any person except myself or my spouse for the current tax year and for the tax year immediately prior to the year in which this application is made;		(d) For applicants under the age of 24, a true and correct copy of the first and signature page of the state and federal tax returns of your parents, or legal custodian(s), for the tax year immediately prior to the year in which this application is made.				
	and I have not received and will not receive financial assistar cash or in kind of an amount equal to or greater than one-hamy support from another person or persons, except my spot during the current year or the calendar year immediately prior the year in which this application is made.	nce in lf of ase,	retur the t	The extent of disclosure required concerning state and federal tax rns is limited to the number of dependents claimed and the signature of axpayer and shall not require disclosure of financial information ained in the returns.)			

Section 3: Proof of Residency									
	section is being com e: Not to be completed by			nt 🗖 Legal Cust	odian 🛘 Other per	son upon whom the studer	nt is dependent		
	1 5	1 1 1	5 ,	n be made unles	s all questions are	completed and all requir	ed documentary		
evid	ence is submitted.								
1	Name		Einst	M:J	P.	hone ()			
	Address	Number & Stre	et		City	State	ZIP		
2	Date of arrival in C	Oregon to establish a	permanent home: M	o Day	Yr	Why you moved to O	regon		
3			Tes No If "no,"		h a copy of both s	ides of your Resident Alid	en Card, Form I-94,		
4	Are you currently o	on active duty, or a n	nember of a reserve c	omponent, of the	U.S. armed forces	(Army, Navy, Air Force, M	arine Corps, Coast		
			No If "no," skip						
			tioned and residing in				T (C)		
	If "yes," y	ou must attach documen	itation confirming your ci	irrent military assign	ment status (DD220,	military orders or statement from	n commanding officer).		
	` ' ' '	•	ot been stationed/resi	0 .		*			
	State or co	ountry				from	to		
			ver filed an Oregon in rn(s) was/were filed _			attach copy of most recent Orego	n income tax return(s).		
	(d) From what sta	ate did you enter the	military?		_ Discharge Date	(Provide cop	by of DD214 form.)		
_									
5	Are you the spouse	or dependent child	of an armed forces m	nember assigned t	o duty in Oregon?	□ Yes □ No			
ô	You must attach	proof of your prese	? If not, explain how nce in Oregon the pathecks, letters from la	oast 12 months (provided e.g. copies of rent re	eceipts, lease or home purch	nase agreements,		
	property tax statem	ient, cancened rent c	arceks, letters from la	ndiords).					
7		List chronologically your employment, activity or physical presence for the past two years, giving exact information as asked below.							
	You must account for entire two year period. (Add additional pages if r Dates Location				necessary) Employer or Activities				
			Location	1		Employer of rice	ivides		
	from		City	State	Employer/A	ctivity	Hours/week		
	, 5,5	. 3.3	Cuy	Simo	<i>Employer</i> / 2 10	uivily	110013/ 0000		
	from			State	Employer/A	ctinitu	Hours/week		
		, 3,3	Cuy	Simo	<i>Employer</i> / 2 10	uivily	110013/ 0000		
	from	to	City	State	Employer/A	ctinity	Hours/week		
	. 5.5	, 5,5	Cuy	Sime	<i>Employer</i> / 2 16	iiiiii	110013/ 0000		
	from	to		State	Employer/A	ctinitu	Hours/week		
	mo./ uuy/ yr.	<i>mo., aay, yr.</i>	Cuy	Simo	<i>Employer</i> / 2 10	uivily	110013/ 0000		
3	If you were out of	Oregon since your c	continuous presence b	egan, give dates a	and reasons for your	absence.			
	from	to							
	mo./day/yr.		City	State	Reason for A	bsence			
	from	_ to							
	mo./day/yr.		City	State	Reason for A	bsence			
	from	to							
	mo./day/yr.		City	State	Reason for A	bsence			

9	Are you registered to vote?
	If "yes", you must attach copy of your current voter's registration card.
10	Do you own or use any motor vehicles, mobile homes, trailers or boats? Yes No
	If "yes", you must attach a copy of your current vehicle registration (not the title).
	Have any of these vehicles previously been registered in another state? \Bigcup Yes \Bigcup No
11	Do you have a driver's license or state issued ID?
	If "yes," you must attach a copy of your current driver's license or state issued ID.
12	List years for which you filed an Oregon Income Tax Return
	You must attach a copy of your taxes filed in the state of Oregon. (Note: See Section 2 for documentation of tax returns.)
13	Is income being withheld from your earnings for Oregon income taxes? Yes No
14	Do you intend to file an Oregon Income Tax Return this year? Yes No If "no," why not?
pertin	sonal Statement If you have additional information/documentation you wish to include to support your case, or a statement to provide the net information related to your intent in coming or returning to Oregon please provide additional sheets as necessary. If providing a statement, the pay special attention to your history and activities as related to the residency requirements as outlined in the Residency Standards.
If app	al Steps blying as an independent student, only the student must sign this affidavit; if applying as a dependent student, both the student and the person ing the student as a dependent must sign this affidavit.
	BE SIGNED BY STUDENT
Ву р	roviding my name, I swear that the information supplied by me in this affidavit is complete, true and correct, and the Oregon University e I submit this may rely on this information.
Signa	ture of student
TO I	BE SIGNED BY PERSON COMPLETING SECTION 3 FOR A DEPENDENT STUDENT
	roviding my name, I swear that the information supplied by me in this affidavit is complete, true and correct, and the Oregon University e I submit this may rely on this information.
Signa	ture of parent, guardian or other person completing section 3

When completed, return this form to the Residency Officer at the institution where residence classification is sought. For further information or assistance with residency classification, please also contact the Residency Officer at the institution of interest.

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