

RESIDENCE CLASSIFICATION: All students must declare a residency status prior to the start of the term.

A Florida "resident for tuition purpose" is a person (or a dependent person whose parent or legal guardian) who has established and maintained legal residence in Florida for at least the last 12 consecutive months. Residence in Florida must be a bonafide domiciliary rather than for the purpose of maintaining a residence incident to enrollment at an institution of higher education. Other persons not meeting the 12 month legal residence requirement may be classified as Florida residents for tuition purposes only if they fall within one of the limited special categories authorized by the Florida Legislature [Florida Statute 240.1201(2)(a)]. (Statute subject to change) All other persons are ineligible for classification as a Florida "resident for tuition purposes."

To qualify as a Florida "resident for tuition purpose", you must be a U.S. citizen, permanent resident alien or a legal alien granted indefinite stay by the Immigration and Naturalization Service. Living in or attending school in Florida will not, in itself, establish legal residence. Students who depend on out-of-state parents for support are presumed to be legal resident of the same state as their parents unless one parent has established legal residence in Florida for more than 12 months. Residence in Florida must be for the purpose of establishing a permanent home and not merely incident to enrollment at an institution of higher education. Documents supporting the establishment of legal residence must be dated, issued or filed 12 months before the first day of classes of the term for which a Florida resident classification is sought.

Definitions

DEPENDENT: A person for whom 50 percent or more of his/her support is provided by another as defined by the Internal Revenue Service.

INDEPENDENT: A person who provides more than 50 percent of his/her own support.

(A copy of your and/or your parents' most recent tax return or other documentation may be requested to establish dependence/independence.)

NON-FLORIDA RESIDENTS ONLY

I understand I DO NOT qualify as a Florida resident for tuition purposes for the term for which this application is submitted and that if I should qualify for a future term, it will be necessary for me to file the required documentation prior to the beginning of the term in order to be considered for Florida residency classification.

Signature of Applicant in ink _____

Date (mm/dd/yy) _____

FLORIDA RESIDENT FOR TUITION PURPOSES AFFIDAVIT

PRIOR TO THE FIRST DAY OF THE TERM, **YOU MUST HAVE SHOWN PROOF** OF FLORIDA RESIDENCY TO QUALIFY FOR IN-STATE TUITION.
(IF YOU DO NOT QUALIFY AS A FLORIDA RESIDENT, SIGN THE NON-FLORIDA RESIDENT SECTION ABOVE)

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| <p><input type="checkbox"/> 1. I am an independent person at least 24 years of age and have maintained legal residence in Florida for at least the last 12 consecutive months.</p> <p><input type="checkbox"/> 2. I am an independent person under the age of 24 and have maintained legal residence in Florida for at least the last 12 consecutive months. (Required: Proof of independent status)</p> <p><input type="checkbox"/> 3. I am a dependent person under the age of 24 and my parent or legal guardian has maintain legal residence in Florida for at least the last 12 consecutive months.</p> <p><input type="checkbox"/> 4. I am a dependent person who has resided for five years with an adult relative other than my parent or legal guardian, and my relative has maintained legal residence in Florida for at least the last 12 months. (Required: Copy of most recent tax return on which you were claimed as a dependent or other proof of dependency)</p> <p><input type="checkbox"/> 5. I was previously enrolled at a Florida state institution and classified as a Florida resident for tuition purposes. I abandoned my Florida domicile less than 12 months ago and am now re-establishing Florida legal residence.</p> <p><input type="checkbox"/> 6. I am a member of the Armed Services of the United States and I am stationed in Florida on active military duty pursuant to military orders, or whose home of record is Florida, or I am a member's spouse or dependent child. (Required: Copy of military orders or DD2058 showing home of record)</p> <p><input type="checkbox"/> 7. I am a full-time instructional or administrative employee employed by a Florida public school, community college or institution of higher education, or I am the employee's spouse or dependent child. (Required: Copy of employment verification)</p> <p><input type="checkbox"/> 8. I am part of the Latin American/Caribbean Scholarship Program. (Required: Copy of scholarship papers)</p> <p><input type="checkbox"/> 9. I am a qualified beneficiary under the terms of the Florida Prepaid College Program (s. 1009.988, F.S.) (Required: copy of Florida pre-paid recipient card)</p> | <p><input type="checkbox"/> 10. I am living on the Isthmus of Panama and have completed 12 consecutive months of college work at the F.S.U. Panama Canal Branch, or I am the student's spouse or dependent child. (Required: Copy of marriage certificate or proof of dependency)</p> <p><input type="checkbox"/> 11. I am a Southern Regional Education Board's Academic Common Market graduate student. (Required: Certification letter from State Coordinator)</p> <p><input type="checkbox"/> 12. I am a full-time employee of a state agency or political subdivision of the state whose student fees are paid by the state agency or political subdivision for the purpose of job-related law enforcement or corrections training.</p> <p><input type="checkbox"/> 13. I am a McKnight Fellowship recipient. (Required: Verification from graduate studies)</p> <p><input type="checkbox"/> 14. I am an active member of the Florida National Guard who qualifies under s.250.10 (7) and (8) for the tuition assistance program.</p> <p><input type="checkbox"/> 15. I am an active duty member (or the spouse/dependent child of the member) of the Armed Services of the United States attending a public community college or university within 50 miles of the military establishment where the member is stationed, if such military establishment is within a county contiguous to Florida.</p> <p><input type="checkbox"/> 16. I am an active duty member (or the spouse or dependent child of the member) of the Canadian military residing or stationed in this state under the North American Air Defense (NORAD) agreement, attending a public community college or university within 50 miles of the military establishment where the active duty member is stationed.</p> <p><input type="checkbox"/> 17. I am a U.S. Citizen living outside the U.S. who is teaching at a Department of Defense Dependent School or in an American International School and who has enrolled in a graduate level education program which leads to a Florida teaching certificate.</p> <p><input type="checkbox"/> 18. I am an active duty member (or spouse/dependent child of the member) of a foreign nation's military who is serving as a liaison officer. I am residing or stationed in Florida and attending a community college or state university within 50 miles of the military establishment where I am stationed.</p> |
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ATTACH COPIES OF DOCUMENTATION INDICATED ABOVE – ADDITIONAL DOCUMENTATION (e.g., copies of voter's registration, driver license, tax returns, deeds, etc.) may be required by the College in some cases. **ALL DOCUMENTATION IS SUBJECT TO VERIFICATION.** Someone other than the applicant (e.g., parent) should complete this affidavit if the applicant is dependent or seeks to be classified as a Florida resident by virtue of a relationship; otherwise, the applicant must complete this affidavit. **PLEASE PRINT:**

1. Name of Applicant _____ 2. Student ID or SSN: _____
(The **CLAIMANT** is the person who is claiming Florida residency, e.g., the applicant (if independent), parent, spouse or legal guardian. **All of the questions below pertain to the claimant.**)
3. Name of Claimant: _____ 4. Relationship of Claimant to Applicant: _____
5. Permanent Legal Address of Claimant: _____
6. Date Claimant Began Establishing Legal Florida Residence and Domicile: _____ Telephone Number of Claimant () _____
7. Claimant's Voter Registration: State: _____ County: _____ Number: _____ Original Issue Date: ____/____/____
mm / dd / yy
8. Claimant's Drivers License: State: _____ Number: _____ Issue Date: ____/____/____
mm / dd / yy
9. Claimant's Vehicle Registration: State: _____ Vehicle Information Number (VIN#): _____ Issue Date: ____/____/____
mm / dd / yy
10. Claimant's Immigration status: ☐ Permanent Resident Alien _____ Issue Date: ____/____/____ (Copy of both sides of card required)
(If Student's status is other than US Citizen) Resident Alien Card Number mm / dd / yy
- ☐ Asylee or Refugee Alien ☐ Other _____

ADDITIONAL DOCUMENTATION MAY BE REQUESTED BY THE INSTITUTION

I do hereby swear or affirm that the above-named applicant meets all requirements indicated in the category checked above for classification as a Florida "resident for tuition purposes". I understand that a false statement in this affidavit will subject me to penalties for making a false statement pursuant to 837.06, Florida Statutes, and that a false statement in this affidavit may subject the above-named student to the penalties for making a false or fraudulent statement.

Signature of Applicant in ink _____

and of _____

Person Claiming Florida Residency if other than Applicant _____

Date mm/dd/yy _____