

Application for Residency Reclassification

Generally, a student's residency classification is determined at the time of application for admission. Any student classified as an out of state resident who believes they qualify for (1) in-state tuition as a resident of Connecticut in accordance with Connecticut General Statute 10a-26, or (2) the New England (MA, ME, NH, RI, VT), New Jersey, or New York tuition discount as a resident of one of those states in an approved program, may file this application at any time to request a change of residency.

You may or may not be called for an interview, after which you will receive notification of your application status. If approved, reclassification will not be retroactive to prior semesters. As a reminder, all students are subject to the [Student Code of Conduct & Statement of Disciplinary Procedures](#), which prohibits the act of providing false information to school officials.

STEP ONE: DETERMINE YOUR APPLICATION CATEGORY (Please select one):

- A You are applying as an emancipated student using your own information.** To be eligible as an emancipated student, you must be at least 18 years old, you cannot receive regular financial assistance from parents or guardians, and you must have resided in your state of residence for at least twelve consecutive months
- B You are applying as an unemancipated student using your parental or legal guardian information.** To be eligible as an unemancipated student using parental/guardian information, your parents/guardian must have resided in your state of residence for at least six consecutive months and be employed full-time.
- C You are applying as a resident who attended two years of and graduated from a high school in your state of residence.** To be eligible, you must be a have attended two years of a high school in your state of residence, graduated from a high school in your state of residence (or the equivalent) and be registered as an entering student at or enrolled in the university.
- D You are applying as an emancipated student using your spouse's information.** To be eligible to receive in-state tuition through your spouse, your spouse must have resided in your state of residence for at least six consecutive months and be employed full-time.
- E You, your spouse, or a parent (if unemancipated minor) are a member of the military** whose home of record is in your state of residence or is stationed in your state of residence pursuant to military orders.
- F You are a veteran, or dependent of a veteran, who resides in your state of residence** and was discharged no more than three years prior to enrollment, and after a period of at least 90 days' active duty. Please contact the SCSU Veteran Services Office for assistance verifying your eligibility for in-state tuition. Do not complete this application packet.

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STEP TWO: APPLICANT INFORMATION

Name (print) _____ Phone (____) _____
Last First Middle

Current Residential Address _____
Number & Street (include Apt #) City State Zip

SCSU Email _____@southernct.edu

SCSU Student ID Number _____ Age _____ Date of Birth _____

What high school(s) did you attend and graduate from (or the equivalent) starting with the most recent:

School _____ Years attended _____

City, State _____ Graduated: Yes No

School _____ Years attended _____

City, State _____ Graduated: Yes No

School _____ Years attended _____

City, State _____ Graduated: Yes No

When did you establish permanent residency in your state of residence? _____
Month/Day/Year

Are you a U.S. citizen? Yes No

If "no", please attach a copy of both sides of your Resident Alien Card, or other documentation reflecting your visa type or current status, if available.

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STEP THREE: PROOF OF DOMICILE

For students requesting reclassification under Category A, C, or E, this section is to be filled out by the student; for students requesting reclassification under Category B this section is to be filled out by the student's parent or legal guardian; and for students requesting reclassification under Category D this section is to be filled out by the student's spouse.

Name (print) _____ Phone (____) _____
Last First Middle

Current Residential Address _____
Number & Street (include Apt #) City State Zip

When did you establish permanent residency in your state of residence? _____
Month/Day/Year

Purpose of relocation? Employment Education Other

If "other" please explain: _____

If you were out of your state of residence during the past 12 months, for more than 3 consecutive weeks, give dates of your absence:

City, State _____ To/From Dates: _____

Reason: _____

City, State _____ To/From Dates: _____

Reason: _____

City, State _____ To/From Dates: _____

Reason: _____

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STEP FOUR: AFFIDAVIT

I, _____, hereby affirm that:

- I currently reside in the state of _____;
- If I am filing under Category C, I have completed two years of high school level education in the state of _____ and hold a _____ high school diploma or its equivalent;
- I am registered as an entering student or am currently enrolled at SCSU; and
- If I am undocumented or in Temporary Protected Status or Deferred Action for Childhood Arrivals, I have filed an application to legalize my immigration status or will file an application to legalize my immigration status as soon as I become eligible to do so.
- To the best of my knowledge and belief, the information given in this application is complete and accurate. I understand that students who falsify their information or intentionally submit inaccurate information will be subject to the Student Code of Conduct.

Student Signature

Date

STEP 5: SUBMIT APPLICATION

Please submit this completed application along with all supporting documentation from Page 5 to the appropriate office depending on your status as a new incoming student or a current student:

Undergraduate Applicants First-Year Admission 501 Crescent Street New Haven, CT 06515 Tel: (203) 392-5644 Fax: (203) 392-5727 Email: admissions@southernct.edu	Transfer Applicants Transfer Admission 501 Crescent Street New Haven, CT 06515 Tel: (203) 392-5730 Fax: (203) 392-5727 Email: transfer@southernct.edu	Graduate Applicants Graduate Admission 501 Crescent Street New Haven, CT 06515 Tel: (203) 392-9670 Email: gradadmissions@southernct.edu	All Current Students Registrar's Office 501 Crescent Street New Haven, CT 06515 Tel: (203) 392-5301 Fax: (203) 392-7144 Email: registrar@southernct.edu
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FOR OFFICE USE ONLY:

Approved, Effective Term: _____

Denied

Signature: University Representative

Date

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Document Checklist

All documents must be presented along with the application. The University reserves the right to request additional documentation in review of your application. ***All documents must be current and valid.***

Application Category	Proof of Identity	Proof of Residency	Additional Requirements
Applying as an Emancipated Student A	<input type="checkbox"/> Student's federal, state, municipal, or other valid and unexpired government issued photo ID	<input type="checkbox"/> Two documents showing student's residency for 12 consecutive months prior to start of current term (i.e. mortgage, lease agreement, utility bill)	<input type="checkbox"/> Front page of federal and state tax returns (please redact social security number) <input type="checkbox"/> Student Financial Aid Report
Applying as an Unemancipated Student with Parental/Legal Guardian Information B	<input type="checkbox"/> Student's AND Parent's federal, state, municipal, or other valid and unexpired government issued photo ID	<input type="checkbox"/> Two documents showing parent/legal guardian residency for 6 consecutive months prior to start of current term (i.e. mortgage, lease agreement, utility bill)	<input type="checkbox"/> Front page of parent/legal guardian federal and state tax returns (please redact social security number)
Applying as a High School Graduate in your state of residence C	<input type="checkbox"/> Student's federal, state, municipal, or other valid and unexpired government issued photo ID	<input type="checkbox"/> Two documents showing student's residency (i.e. mortgage, lease agreement, utility bill)	<input type="checkbox"/> All high school transcript(s)
Applying with Spousal Information D	<input type="checkbox"/> Student's AND Spouse's federal, state, municipal, or other valid and unexpired government issued photo ID	<input type="checkbox"/> Two documents showing spouse's residency for 6 consecutive months prior to start of current term (i.e. mortgage, lease agreement, utility bill)	<input type="checkbox"/> Marriage certificate <input type="checkbox"/> Front page of spouse's federal and state tax returns (please redact social security number)
Applying with Military Orders E	<input type="checkbox"/> Student's federal, state, municipal, or other valid and unexpired government issued photo ID	<input type="checkbox"/> Military Orders	<input type="checkbox"/> Front page of spouse/parent federal and state tax returns, if applying under spouse/parent military orders. (please redact social security number)