

THE UNIVERSITY OF MEMPHIS®

APPLICATION FOR RESIDENCY CLASSIFICATION

In order that we may have full information with which to determine your classification for the purpose of paying fees, it is necessary that you complete and return this form to the Office of Admissions, 101 Wilder Tower, University of Memphis, Memphis, Tennessee 38152-3520. Read all the questions carefully before attempting to answer them. The burden of proof of all conditions pertaining to residence is placed upon the student and/or his parents or guardian, including the responsibility for submission of any necessary documentary substantiation. Guidelines for the classification of students for fee paying purposes are available online at: <http://www.memphis.edu/admissions/residency.php>. **PLEASE NOTE: Residency appeals are reviewed only after an admission decision has been made.**

UofM STUDENT ID

U _____

STATUS (Check One)

- Single Male Married Male
 Single Female Married Female

FULL LEGAL NAME (Please Print)

LAST FIRST MIDDLE/MAIDEN SUFFIX

PRESENT HOME ADDRESS (Please Print)

APT # / STREET ADDRESS CITY STATE ZIP DATE YOU MOVE TO PRESENT ADDRESS – MONTH / DAY / YEAR

PERMANENT HOME ADDRESS (Please Print)

APT # / STREET ADDRESS CITY STATE ZIP

(AREA CODE) PHONE NUMBER TN-COUNTY

BIRTHDATE (month / day / year) **VOTER REGISTRATION / AUTO LICENSE / DRIVER'S LICENSE NUMBERS**

VOTER REGISTRATION NUMBER / STATE AUTOMOBILE LICENSE NUMBER / STATE DRIVERS'S LICENSE NUMBER / STATE

HOUSING INFORMATION

Do you own the dwelling in which you live? Yes No Date of purchase: (month / year)

Do you own the land on which the dwelling is located? Yes No If you do not own your dwelling, do you rent? Yes No

STUDENT INFORMATION

Have you lived in Tennessee continuously since birth? Yes No If no, when did your latest stay in Tennessee begin? (month / year)

Are you a citizen of the United States? Yes No If no, what is your Visa Type and Citizenship?

Where did you complete your high school education? When did you complete your high school education?

SCHOOL CITY STATE MONTH/YEAR

Have you ever been a student at the University of Memphis? YES, when did you enroll? (semester / year) Undergrad Grad Law Are you (or will you be) a student athlete at the UofM? Yes No

NO, when do you plan to enroll? (semester / year) Undergrad Grad Law

PREVIOUS COLLEGE / UNIVERSITY WORK (List ALL previous colleges/universities attended other than the University of Memphis.)

FULL NAME OF COLLEGE	CITY & STATE	DATES OF ATTENDANCE (MONTH / YEAR) – (MONTH / YEAR)
		-
		-
		-

VETERAN INFORMATION

If you have been in active military service, from which state did you enter the service? Which state did you declare to be your home of record?

Date of entry: (month / year) Date of release: (month / year)

IF YOU HAVE NOT PREVIOUSLY DONE SO, PLEASE SUBMIT A COPY OF YOUR DD FORM 214 DISCHARGE WITH THIS FORM.

EMPLOYMENT INFORMATION

(Please indicate any full-time employment during the last three years, and give names of employers, the locations and the dates of employment. NOTE: Graduate teaching and research assistantships are not considered as full-time positions.)

EMPLOYER	LOCATION	DATES OF EMPLOYMENT (MONTH / YEAR) – (MONTH / YEAR)
		-
		-

EMPLOYMENT WITHIN THE PAST TWELVE MONTHS MUST BE VERIFIED BY A LETTER FROM THE EMPLOYER STATING THE DATE EMPLOYMENT BEGAN.

PARENTAL INFORMATION**FATHER'S INFORMATION**

Full Name: _____
LAST FIRST MIDDLE

Permanent Address: _____
APT # / STREET ADDRESS CITY STATE ZIP

Occupation: _____ Place of Employment: _____

Did your father claim you as a dependent on his most recent tax return? Yes No

If your father is now living in Tennessee, how long has he been living here? _____ If your father has moved from Tennessee, give date of leaving. _____

IF THE REASON FOR HIS BEING TEMPORARILY OUT OF STATE IS DUE TO MILITARY SERVICE, PLEASE SECURE A COPY OF HIS SERVICE RECORD, INDICATING HIS PERMANENT ADDRESS AND ENCLOSE WITH THIS FORM.

MOTHER'S INFORMATION

Full Name: _____
LAST FIRST MIDDLE

Permanent Address: _____
APT # / STREET ADDRESS CITY STATE ZIP

Occupation: _____ Place of Employment: _____

Did your mother claim you as a dependent on her most recent tax return? Yes No

If your mother is now living in Tennessee, how long has she been living here? _____ If your mother has moved from Tennessee, give date of leaving. _____

If remarried, what is her present name? _____

GUARDIAN INFORMATION*(If other than your parents)*

Do you have a legally appointed guardian? Yes No

IF YES, PLEASE GIVE NAME AND ADDRESS OF GUARDIAN AND ATTACH A COPY OF THE GUARDIANSHIP PAPERS. A GUARDIAN'S NOTARIZED STATEMENT OF SUPPORT SHOULD BE ATTACHED TO THIS FORM ALSO.

Full Name: _____
LAST FIRST MIDDLE

Permanent Address: _____
APT # / STREET ADDRESS CITY STATE ZIP

MARITAL INFORMATION

Date of Marriage: _____ Place of Marriage: _____

Spouse's Name/Birthdate: _____
LAST FIRST MIDDLE / MAIDEN BIRTHDATE

Has your spouse been enrolled at a college in Tennessee? Yes No If YES, when was he/she enrolled? _____
 If YES, name of college enrolled: _____

How long has he/she been continuously living in Tennessee? _____

Name of his/her employer in Tennessee: _____ Location: _____

EXPLANATION OF RESIDENCY REQUEST

What is the basis for your claim to be a resident for fee paying purposes while attending the University of Memphis? You should provide detailed information on previous history in Tennessee, family connections and special circumstances that may exist. Add extra paper if needed.

I am requesting a change of status for the: Fall Spring Summer Year?

THE TENNESSEE ELIGIBILITY VERIFICATION FOR ENTITLEMENTS ACT REQUIRES AN APPLICANT FOR STATE FINANCIAL AID TO CHECK ONE OF THE BOXES IN THE FOLLOWING STATEMENT SIGN BELOW

I swear or affirm under penalty of perjury under the laws of the state of Tennessee that: I am a United States citizen ; or I am an alien lawfully present in the United States . I understand that this statement is required by Tennessee law because I have applied for a public benefit. I understand that Tennessee law requires me to provide documentation verifying the status indicated above prior to receipt of this public benefit. I understand that knowingly and willfully making a false, fictitious, or fraudulent statement or representation shall subject me to liability under the Tennessee False Claims Act, Tennessee Code Annotated 4-18-101 et seq. I understand that if I am found to have made a false or misleading statement my admission may be rescinded or I may be disciplined by the University of Memphis.

SIGNATURE**DETERMINATION**

Please DO NOT write in the spaces below.

Resident Non Resident Undergrad Grad Law

BY: _____ DATE _____

SPECIAL CONDITIONS:
