

CSU RESIDENCE QUESTIONNAIRE

SUBMIT THE COMPLETED FORM TO THE CAMPUS OFFICE OF ADMISSIONS AND RECORDS

The information requested is deemed relevant and necessary to a proper determination of your residency status for tuition purposes pursuant to the California Education Code Section 68000 et seq. and California Code of Regulations 41900 et seq. Your completed application will help us determine your eligibility. Failure to answer all questions may cause you to be classified as a nonresident. You may submit additional information you believe will establish your California residency. Questions about residency requirements should be referred to a campus residence specialist. For CSU residency requirements, please visit the CSU Residency for Tuition Purpose website, www.calstate.edu/residency.

Instructions: Please complete a separate questionnaire for each campus. Only one term and one campus may be selected per questionnaire and all appropriate fields must be completed or questionnaire will be returned to you unprocessed.
To successfully view and complete this fillable form, download the form and enter all the required information.

Classified as a nonresident for a previous term ☐ Yes (Continuing Student – a student enrolled in a previous term). Please complete Part A, B, C, D (if applicable), and E
☐ No (Newly admitted students only). Please complete Sections A, B, D (if applicable), and E

Select only one term: Fall ☐ Winter ☐ Spring ☐ Summer ☐ Year _____ Campus _____

PART A: STUDENT INFORMATION

Name _____ Student ID _____
 Last Name First Middle

Phone Number _____ E-mail _____

Birthdate ____/____/____ Birthplace _____
 Month Day Year

Permanent Legal Address _____

City _____ State _____ ZIP _____

Did you attend a California school? Yes ☐ No ☐ (If yes, you may be exempt from payment of nonresident tuition under AB 540.)

Did you attend an online school offered in another state, but continued to reside in California?

Yes ☐ No ☐ (Click Yes to fill out fields.) please list school _____ State _____

Did you attend an out-of-state school? Yes ☐ No ☐

Did you pay non-resident fees? Yes ☐ No ☐

PART B: RESIDENCE DETERMINATION DATE

The student or parent/legal guardian must be physically in California for more than one year immediately preceding the Residence Determination Date in which enrollment is contemplated.

Select the option that applies to you and complete the requested information below.

☐ **I am or will be 19 years of age or older** by the Residence Determination Date.

☐ **I will be younger than 19 years of age** by the Residence Determination Date.

Name _____

Relationship _____

Does your parent/legal guardian currently live in California? Yes No

☐ **I am or was a foster youth.**

List the state where you were under the care of the Department of Social Services. _____

Provide the following information: (a) a copy of a juvenile dependency court document indicating foster care in the child welfare system; or (b) documentation from county social services confirming you were under the care of the Department of Social Services.

Residence Determination Dates

FallSeptember 20
 Winter January 5
 SpringJanuary 25
 Summer June 1

CalState TEACH

Stage 1..... September 20
 Stage 2..... January 5
 Stage 3..... June 1
 Stage 4..... September 20

Student Name _____ Student ID _____

Page 2 of 5

QUESTIONS 1 THROUGH 11

If you will be 19 years of age or older by the Residence Determination Date, answer Questions 1–11 using your own information.

If you will be younger than 19 years of age by the Residence Determination Date, have the natural or adoptive parent with whom you most recently resided answer Questions 1–11 using their information.

Exception: If you have a special circumstance (e.g., foster youth, parents deceased, unaccompanied minor, married) and are independent of your parents, answer Questions 1–11 using your own information.

1. What state do you regard as your permanent home? _____
2. If California, when did your present stay begin _____/_____/_____
Month Day Year
3. Employed in California in the past year? Yes ☐ No ☐ (Click Yes to fill out fields below.)
Employer(s) _____ From _____/_____/_____ To _____/_____/_____
Month Day Year Month Day Year
Employer(s) _____ From _____/_____/_____ To _____/_____/_____
Month Day Year Month Day Year
4. Have you ever registered to vote? (Click Yes to fill out fields below.) Yes ☐ No ☐
State _____ Date registered _____/_____/_____ Last Voted _____/_____/_____
Month Day Year Month Day Year
State _____ Date registered _____/_____/_____ Last Voted _____/_____/_____
Month Day Year Month Day Year
5. Do you possess a driver's license and/or ID Card? (Click Yes to fill out fields below.) Yes ☐ No ☐
State _____ Date Issued _____/_____/_____ Previous State _____ Date Issued _____/_____/_____
Month Day Year Month Day Year
6. Current registration of all vehicles owned or operated
State _____ Date Issued _____/_____/_____ State _____ Date Issued _____/_____/_____
Month Day Year Month Day Year
7. Are all personal effects located in California? Yes ☐ No ☐ If "no," attach explanation on a separate piece of paper.
8. State where last three state income tax returns filed on total income and year covered by each.
State _____ Year _____ State _____ Year _____ State _____ Year _____
9. Address shown on most current W-2 _____

Please answer the following questions if you currently or previously owned, rented or leased a residence.

Please list all residences during the past three years.

10. Purchased, leased or rented
Date _____/_____/_____ to Date _____/_____/_____ Location _____
Month Day Year Month Day Year City and State
Date _____/_____/_____ to Date _____/_____/_____ Location _____
Month Day Year Month Day Year City and State
Date _____/_____/_____ to Date _____/_____/_____ Location _____
Month Day Year Month Day Year City and State
11. Active California Bank(s) Name _____ Opened _____/_____/_____
Month Day Year
_____ Opened _____/_____/_____
Month Day Year

Please note, do not include bank account numbers.

If you provide the campus with copies of your bank statements or copies of your tax returns, for your security, do not include the bank account number(s) or Social Security Number(s).

CONTINUED ON NEXT PAGE

PART C: IS ONLY FOR RECLASSIFICATION OF CURRENT STUDENTS WHO HAVE BEEN CLASSIFIED AS A NONRESIDENT IN A PREVIOUS TERM

Respond to all questions. If a question does not apply to you, use "n/a" to indicate that it is not applicable.

I have been classified as a nonresident in a previous term and I am requesting reclassification. Yes ☐ No ☐

Has there been a change in your U.S. citizenship, permanent residency, visa or other status (e.g., meets AB 540 requirements)? Yes ☐ No ☐

(Click Yes to fill out below.)

Select a box that best applies to you and provide documentation that demonstrates you meet the criteria.

- ☐ Dependent on a parent who has California residence for more than one year immediately preceding the residence determination date
- ☐ Enrolled in a graduate or post baccalaureate program, regardless of age
- ☐ Turned 24 years of age by the residence determination date
- ☐ Married or registered domestic partner as of the residence determination date
- ☐ Active duty members serving in the U.S. Armed Forces
- ☐ Veteran of the U.S. Armed Forces
- ☐ Legal dependent other than spouse or registered domestic partner
- ☐ Former ward of the court, foster youth or both parents are deceased
- ☐ Declared by a court to be an emancipated minor
- ☐ Unaccompanied youth who is homeless or at risk of becoming homeless
- ☐ I do not meet any of the criteria listed (student must answer questions 1-8)

If you did not meet a criteria listed above, please answer all of the following questions (1-8). Failure to provide complete information may result in nonresident classification (Ed Code 68041).

1.

Will your parent(s) claim you as a dependent exemption for state and federal tax purposes for the current calendar year?

Yes

No
2.

Were you claimed as an exemption for state and federal tax purposes by your parent(s) in any of the past three calendar years?

Yes

No

If yes, please state year(s) _____

Year

Year

Year
3.

Have you received or will you receive more than \$750 in financial assistance from your parent(s) in the current calendar year?

Yes

No
4.

Did you receive more than \$750 in financial assistance from your parent(s) during any of the past three calendar years?

Yes

No

If yes, please state year(s) _____

Year

Year

Year
5.

Have you lived or will you live for more than six weeks with your parent(s) during the current calendar year?

Yes

No
6.

Did you live for more than six weeks with your parent(s) during any of the past three calendar years?

Yes

No

If yes, please state year(s) _____

Year

Year

Year
7.

List all places you have lived prior to your most recent arrival in California, the dates you lived in each place and the parent with whom you resided.
If you need more room, please attach an explanation on a separate sheet of paper.

From _____/_____/_____ To _____/_____/_____ State or Country _____ Parent you resided with _____

Month Day Year Month Day Year

From _____/_____/_____ To _____/_____/_____ State or Country _____ Parent you resided with _____

Month Day Year Month Day Year
8.

Source(s) of financial support during the past year _____

PART D: EXCEPTIONS/EXEMPTIONS Military ☐ AB 540 ☐ *Other Exemptions/Exceptions ☐ _____ (choose applicable exception from www.calstate.edu/residency). If you are not eligible for resident classification, you still may be eligible for an exemption or exception from payment of nonresident tuition. *Other exceptions/exemptions are limited to those listed at www.calstate.edu/residency.

Military

Have you ever served in the United States military? Yes ☐ No ☐

Are you a dependent (child/spouse) of a person who served in or is currently serving in the U.S. Armed Forces? Yes ☐ No ☐

If yes,

Date joined ____/____/____ From which state _____ Date separated from active duty, if any ____/____/____
Month Day Year Month Day Year

What is your home of record? _____

What was your last permanent duty station? _____ From ____/____/____ To ____/____/____
Month Day Year Month Day Year

☐ I served in the U.S. Armed Forces and am eligible to receive educational assistance under either the Montgomery GI Bill® or Post-9/11 GI Bill® educational benefits program. I reside in California.

Provide: A copy of a Certificate of Eligibility from the Department of Veterans Affairs (VA).

☐ I am a dependent of a person who served in the U.S. Armed Forces and am eligible to receive educational assistance under the Survivors' and Dependents' Educational Assistance program (Chapter 35). I reside in California.

Provide: Certificate of Eligibility from the VA.

☐ I am a dependent of an active duty servicemember or veteran of the U.S. Armed Forces. I reside in California and have received transferred benefits under the Post-9/11 GI Bill (Chapter 33).

Provide: Certificate of Eligibility from the VA.

☐ I am a dependent of a service member of the U.S. Armed Forces who died in the line of duty after September 10, 2001. I reside in California and am eligible to receive veteran's educational assistance.

Provide: Certificate of Eligibility from the VA.

☐ I am a service member or the dependent of a service member of the U.S. Armed Forces who is stationed in California.

Provide: Permanent Change of Station orders or a statement from the service member's commanding officer.

☐ I served in the U.S. Armed Forces on active duty in California for more than one year and am enrolling within two years of discharge from a California military base.
Provide: (a) a copy of your DD214; (b) evidence of being stationed in California upon separation from service; an affidavit to the institution at which you are enrolling stating your intent to establish residency in California as soon as possible.

☐ I currently participate or will participate in the VA's Vocational Readiness and Employment Program (formerly called Vocational Rehabilitation and Employment) (Chapter 31).

Provide: Tungsten Purchase Order.

GI Bill® is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by VA is available at the official U.S. government website at <https://www.benefits.va.gov/gibill>.

Note: If you currently do not have the necessary documentation to show that you qualify for a military exemption, you will be charged nonresident fees. Once the CSU campus receives and reviews your documentation, fees will be adjusted as appropriate.

Student ID _____

Page 5 of 5

Education Code § 68130.5, as amended, commonly known as AB 540

Certain nonresident students (including U.S. citizens, permanent residents, and undocumented individuals, TPS, asylum, Special Immigrant Juvenile, VAWA, Humanitarian Parole [certain countries]) who have attended, graduated, or achieved the equivalent from a California school (elementary school, secondary school, adult education, community college) may be exempted from paying nonresident tuition. Such students must remain classified as "nonresidents" for residency classification and financial aid eligibility purposes.

You must meet the Attendance Requirement and Graduation/Degree requirements (check boxes that apply).

Attendance requirement (must meet one):

- ☐ I have 3 years of attendance at a California high school.
- ☐ I have 3 or more years of high school coursework and 3 years of attendance in California elementary schools, California secondary schools, or a combination of California elementary and secondary schools.
- ☐ I attended or attained credits at a combination of California high school, California adult school, and California Community College for the equivalent of (3) years or more.

Graduation/Degree Requirement (must meet one)

- ☐ I have graduated or will graduate (before the first term of enrollment at the CSU) with a California high school diploma or the equivalent (i.e., California-issued GED, CHSPE).
- ☐ I completed or will complete (before the first term of enrollment at the CSU) an associate's degree from a California Community College.
- ☐ I completed or will complete (before the first term of enrollment at the CSU) the minimum requirements at a California Community College for transfer to the California State University.

If you checked at least one box in the Attendance and Graduation requirement questions, you may be eligible for California nonresident tuition exemption.

Please complete and submit the [California Nonresident Tuition Exemption Request](#) (commonly known as the affidavit). Please complete a separate form for each campus

Each campus will request additional information (e.g., high school transcripts).

PART E: CERTIFICATION – To be read and signed by all students completing this form.

The burden of proof is on the student to clearly demonstrate both physical presence and intent to remain indefinitely in California. Students seeking reclassification of nonresident status must also demonstrate financial independence. You are required to present evidence in accordance with the Education Code and Code of Regulations referenced above.

Certification – To be read and signed by all applicants to certify the accuracy of the information provided.

I certify under penalty of perjury that the foregoing statements and any other information submitted by me in connection with the determination of my residency are true, complete, and accurate. I understand that my residency determination will be based on the facts stated in this questionnaire and the documents I provide. If I receive classification as a California resident or an exception or exemption, I promise to notify the residence specialist if any of the facts stated in this questionnaire change. I authorize release of any information submitted by me in connection with my application for admission and determination of residency to any person, firm, corporation, association or government, whether federal, state, local, or foreign, but only as necessary to verify or explain the information, to obtain pertinent records, or in connection with perjury proceedings.

Signed at

City and County

Applicant Signature

Date _____

FOR CSU CAMPUS USE ONLY

Form Processed By: _____ Date _____ Approved ☐ Denied ☐

Notes:

--