



# University of California at Santa Cruz Statement of Legal Residence

For term beginning:

- Summer 20\_\_\_\_  Fall 20\_\_\_\_  Winter 20\_\_\_\_  Spring 20\_\_\_\_
- Undergraduate  Graduate

Please complete in ink, sign, and date.

Return to: UCSC Office of the Registrar, 1156 High Street, Santa Cruz, CA 95064. Fax: (831) 459-2737 E-mail: reg\_fees@ucsc.edu

### FOR DEPUTY'S USE ONLY

- Resident  Nonresident

By \_\_\_\_\_

Date \_\_\_\_\_

Notes:

Print full name: Last First Middle W  Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Present mailing address: Number, Street, City, State, Zip Telephone No. \_\_\_\_\_

Permanent residence: Number, Street, City, State, Zip e-mail \_\_\_\_\_

Do you claim to be a resident of California?  Yes  No  
 Are you a citizen of the United States?  Yes  No  
 If no, have you been awarded Permanent Resident status?  Yes  No  
 If no, have you applied for Permanent Resident status?  Yes  No  
 If yes, do you currently hold a valid immigration visa status?  Yes  No

Alien registration number \_\_\_\_\_ Date awarded \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Visa type \_\_\_\_\_ valid from \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Proof of legal status is required

### Motor Vehicle:

Do you have a driver's license?  Yes  No  
 If yes, in which state \_\_\_\_\_  
 Date issued \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Last renewed \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

If a non-driver, do you have a state identification card?  Yes  No  
 If yes, in which state \_\_\_\_\_  
 Date issued \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Do you have a motor vehicle?  Yes  No  
 If yes, state of registration \_\_\_\_\_  
 Date of registration \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Dates of Physical Presence in California:**  Continuously since birth  
 From \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ To \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ From \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ To \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 If you claim California residence but have been absent from the state for more than six weeks during the last 12 months, please attach a statement explaining your absence.

Did you graduate from a Calif. high school after attending for at least three years?  Yes  No  
 Are you a veteran of the U.S. armed forces?  Yes  No  
 Are you a ward of the court?  Yes  No  
 Do you have legal dependents other than a spouse?  Yes  No

### Voter Registration:

Are you registered to vote?  Yes  No  
 State of registration \_\_\_\_\_  
 Date of registration \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Have you voted within the last 15 months?  Yes  No  
 If yes, in which state \_\_\_\_\_ date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

### Financial Information:

	2009	2008	2007
What is your source of financial support? Will your/did your parents claim you as a dependent on their tax returns?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will you/did you file a California resident income tax return?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will you/did you file a resident income tax return in another state?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, what state _____			
Are you/were you employed •in California?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
•outside California?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will you/did you receive loans, scholarships, or benefits that required residence outside California? If yes, attach a statement describing.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

### Bank Accounts:

Checking: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 State \_\_\_\_\_ Date established \_\_\_\_\_

Savings: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 State \_\_\_\_\_ Date established \_\_\_\_\_

### Marital Status:

If married or registered domestic partner:  
 Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ State \_\_\_\_\_

If divorced or partnership terminated:  
 Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ State \_\_\_\_\_

### Colleges or Universities Attended:

From	To	Name of School	State
____ / ____ / ____	____ / ____ / ____	_____	_____
____ / ____ / ____	____ / ____ / ____	_____	_____
____ / ____ / ____	____ / ____ / ____	_____	_____

If you claim to be a resident of California and are/were attending a public or private school outside California within the last two years, please have the school send a letter stating your residence status for tuition purposes and your permanent address on their records.

### U.S. Military Service:

	Student	Spouse/ RDP
Are you or your spouse/registered domestic partner (RDP) currently on active duty?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, state of legal residence on military records _____		
Are you registered with the selective service?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, state of registration _____		

Do you hold any professional licenses?  Yes  No  
 If yes, valid from \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 in state of \_\_\_\_\_

What state do you regard as your permanent home? \_\_\_\_\_  
 How long has it been your home? \_\_\_\_\_  
 Do you plan to remain in California after completing your education?  Yes  No

**Signature required on page 2**

**If you are under 24 years of age, complete the remainder of this form. If not, please sign and date below.**

**If a parent is deceased, give date and place of death; otherwise provide all information required.**

Father: \_\_\_\_\_ Date \_\_\_\_\_ Place \_\_\_\_\_ Mother: \_\_\_\_\_ Date \_\_\_\_\_ Place \_\_\_\_\_

**Are your parents currently on active duty in the United States military?** Father  Yes  No Mother  Yes  No  
Stationed in California: from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_  
Stationed outside California: from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_  
State of legal residence on military records: \_\_\_\_\_

**Are your parents divorced or permanently separated?**  Yes  No  
If yes, with which parent did you live?  Mother  Father  
Dates of residence with mother: From \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ address \_\_\_\_\_  
Dates of residence with father: From \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ address \_\_\_\_\_

**Student's Father:**

Father's full name: \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Address: \_\_\_\_\_ Number, Street, City, State, Zip \_\_\_\_\_

Does he claim to be a California resident, or a resident on your 18th birthday?  Yes  No  
If **no**, no further information is required about father.

If **yes**, provide dates of father's physical presence in California:  
 Continuously since birth **OR** From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_

Is he a citizen of the United States?  Yes  No  
If **no**, is he a U.S. Permanent Resident?  Yes  No Date Issued \_\_\_/\_\_\_/\_\_\_  
**or** does he have an Employment Authorization Card?  Yes  No Date Issued \_\_\_/\_\_\_/\_\_\_  
**or** does he hold a current visa?  Yes  No Visa \_\_\_\_\_ Date Issued \_\_\_/\_\_\_/\_\_\_

Did he/will he file a California income tax return on his total income for:  
Last calendar year?  Yes  No If no, what state? \_\_\_\_\_  
This calendar year?  Yes  No If no, what state? \_\_\_\_\_

Did he/will he claim you as an exemption on his federal or state tax returns for:  
Last calendar year?  Yes  No This calendar year?  Yes  No

Does he have driver's license and/or state ID card?  
 Yes  No

If yes, in which state? \_\_\_\_\_  
Date issued \_\_\_/\_\_\_/\_\_\_  
Date last renewed \_\_\_/\_\_\_/\_\_\_

Does he have a motor vehicle  Yes  No  
If yes, state of registration \_\_\_\_\_

Is he registered to vote?  Yes  No  
If yes, state of registration \_\_\_\_\_  
Date last voted \_\_\_/\_\_\_/\_\_\_

If your father claims to be a California resident but has been absent from the state for more than 6 weeks during the last year, **please attach a statement explaining the absence.**

**Student's Mother:**

Mother's full name: \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Address: \_\_\_\_\_ Number, Street, City, State, Zip \_\_\_\_\_

Does she claim to be a California resident, or a resident on your 18th birthday?  Yes  No  
If **no**, no further information is required about mother.

If **yes**, provide dates of mother's physical presence in California:  
 Continuously since birth **OR** From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_

Is she a citizen of the United States?  Yes  No  
If **no**, is she a U.S. Permanent Resident?  Yes  No Date Issued \_\_\_/\_\_\_/\_\_\_  
**or** does she have an Employment Authorization Card?  Yes  No Date Issued \_\_\_/\_\_\_/\_\_\_  
**or** does she hold a current visa?  Yes  No Visa \_\_\_\_\_ Date Issued \_\_\_/\_\_\_/\_\_\_

Did she/will she file a California income tax return on her total income for:  
Last calendar year?  Yes  No If no, what state? \_\_\_\_\_  
This calendar year?  Yes  No If no, what state? \_\_\_\_\_

Did she/will she claim you as an exemption on her federal or state tax returns for:  
Last calendar year?  Yes  No This calendar year?  Yes  No

Does she have driver's license and/or state ID card?  
 Yes  No

If yes, in which state? \_\_\_\_\_  
Date issued \_\_\_/\_\_\_/\_\_\_  
Date last renewed \_\_\_/\_\_\_/\_\_\_

Does she have a motor vehicle  Yes  No  
If yes, state of registration \_\_\_\_\_

Is she registered to vote?  Yes  No  
If yes, state of registration \_\_\_\_\_  
Date last voted \_\_\_/\_\_\_/\_\_\_

If your mother claims to be a California resident but has been absent from the state for more than 6 weeks during the last year, **please attach a statement explaining the absence.**

**Do you authorize the University of California to release to your parents information regarding your residence file?**  Yes  No  
**Signature required:** I declare under penalty of perjury under the laws of the State of California that the statements on both sides of this page and any attachments submitted by me in connection with the determination of my residence are, and each of them is, true and correct.

**Signature:** \_\_\_\_\_  
**Signed in:** \_\_\_\_\_ city/county/state \_\_\_\_\_ Date \_\_\_\_\_

**Privacy Notice:** All of the information requested on this Statement of Legal Residence is required (by the authority of Standing Order 110.2(a)-(d) of the Regents of the University of California) for determining whether or not you are a legal resident for tuition purposes. Your registration cannot be processed without this information. The Office of the Registrar on campus maintains the requested information. You have the right to inspect University records containing the residence information requested on this form.