



DOMICILE AFFIDAVIT

Dependent Student

The purpose of this domicile affidavit is to provide information in regards to the domicile of the person listed below. A student whose parent/legal guardian/spouse's domicile is in this state and the parent/legal guardian/spouse is entitled to claim the person as an exemption for state and federal tax purposes is eligible for in-state tuition.

Domicile status can be determined only by a statement of facts by the student or parent/legal guardian/spouse. All questions should be read carefully before answering. If you are over the age of 24, you will need to complete and submit the Independent Student Domicile Affidavit to the Admissions, Records & Registration Office.

Parent/legal guardian/spouse of students under 24 years of age will need to complete the lower portion and reverse side of the form and submit along with:

1. Copy of federal income tax return (for the most recent tax year) showing the student has been claimed as a dependent.
2. Parent/legal guardian/spouse's proof of domicile in Arizona. A combination of the following may be used in determining parent/legal guardian/spouse's domicile: (A minimum of two supporting documents listed below are required.)

- Arizona income tax return
- Arizona motor vehicle registration
- Current employment history in Arizona
- Source of financial support in Arizona
- Ownership of real property*
- Transfer of major banking services to Arizona
- Arizona voter registration
- Arizona driver's license
- Dependency as indicated on federal income tax return
- Notarized statement of landlord and/or employer
- Change of permanent residency address on all pertinent records

*Ownership of property or payment of taxes within a state is not necessarily the sole basis for determining residency.

NOTE: Some visa types are not eligible for in-state residency. Contact the Admissions, Records & Registration Office for clarification.

Student Name: _____ Student ID #: _____

Student Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Name of Parent(s)/Legal Guardian/Spouse: _____

All documentation must be submitted to the Admissions, Records & Registration Office.

FOR OFFICE USE ONLY

Approved

Denied

Term

Date

Signature of College Official

To Be Completed By Parent / Legal Guardian / Spouse of Dependent Student

Residency for tuition purposes is determined in accordance with state law (A.R.S. §15-1801 et. sec.) and regulations of the Maricopa Community Colleges Governing Board. Domicile status must be established before the student registers and pays fees. It is the student's responsibility to register under the correct domicile status. All of the Maricopa Community Colleges are subject to the above statutes and regulations. Students who have questions about their residency should contact the Office of Admissions and Records for clarification.

The responsibility of registration under the proper residency classification is placed upon the student. Any student who is found to be classified improperly shall be required to pay full out-of-state tuition. In determining a student's classification, the college may consider all evidence, written or oral, presented by the student and any other information received from any source which is relevant to determining classification. The college may request written sworn statements or sworn testimony of the student. Furnishing false information to any official, college employee or office is a violation of the Student Code of Conduct (AR 2.5.2) and subject to disciplinary sanctions.

(Please print: additional information may be submitted)

ALL QUESTIONS BELOW PERTAIN TO THE PARENT / LEGAL GUARDIAN / SPOUSE

Name of Parent/Legal Guardian/Spouse _____
First Middle Last

Address _____
Street City State Zip

Home Phone # _____ Cell Phone # _____

When did your current residency in Arizona begin? ____/____/____
mm dd yyyy

Are you registered to vote in Arizona? No Yes County _____ Date Registered ____/____/____
mm dd yyyy

List employers during the past two years:

Employer _____

Employer _____

Place of employment _____

Place of employment _____

Dates of employment ____/____/____ to ____/____/____
mm dd yyyy mm dd yyyy

Dates of employment ____/____/____ to ____/____/____
mm dd yyyy mm dd yyyy

Did your employer require that you or your spouse be transferred to Arizona?

No Yes If yes, provide name of employer _____

State Income tax filed for past two years:

1. Tax year _____ State filed _____

2. Tax year _____ State filed _____

Address Given _____

Address Given _____

Current Driver's License/ID number _____ State issued _____ Date Issued ____/____/____
mm dd yyyy

Renewal? No Yes If yes, original date issued ____/____/____
mm dd yyyy

Vehicle License Plate number _____ State registered _____ Date Issued ____/____/____
mm dd yyyy

Renewal? No Yes Vehicle owned by you? No Yes

Are you in the military service? No Yes If yes, where are you stationed? _____

Are you a military dependent? No Yes If yes, where is your spouse stationed? _____

Are you a resident member of an Indian tribe whose reservation land lies in Arizona and extends into another state?

No Yes If yes: Name of Tribe _____ State _____

I certify that I meet the conditions stated above. I understand that falsification of information is a violation of the Student Disciplinary Code (AR 2.5.2) and my dependent may be subject to disciplinary sanctions and the assessment of out-of-state tuition for the period of time for which the domicile requirements were not fulfilled.

Parent/Legal Guardian/Spouse's Signature

Date