

PETITION TO CLAIM MISSOURI RESIDENCY

Undergraduate Office of Admissions
Ward Edwards 1400
University of Central Missouri

Completed petitions must be returned to this office for approval prior to the first day of instruction of the semester for which reclassification is requested.

COMPLETE ENTIRE FORM:

Name _____ SS# _____
Last First Middle

Permanent Missouri Address _____

Phone Number _____ Student 700# _____

Present Address _____

Parents' Address _____

Date of Birth _____ Age _____

Former State of Legal Residence _____ Present State of Legal Residence _____

Period of Uninterrupted Residence in Missouri from: _____ to Present.
Month/Day/Year

Term and Year First Entered UCM _____
Semester/Year

Request Change of Residence Beginning _____
Semester/Year

I have read the "Policy for Classification of Students for Fee Purposes" in the present university catalog.

I further declare that all information provided related to this request is accurate to the best of my knowledge without evasion or misrepresentation.

Signature _____ Date _____

For the consideration of my residency request, I volunteer the following information with the understanding that "clear demonstration" and "persuasive evidence" of the establishment of residence may include the following facts, but their existence alone shall not be deemed to be conclusive evidence of residence.

Office Use Only
Deny _____ Approve _____ Date _____ ENR1 _____ FA notified _____

1. AUTOMOBILE INFORMATION

_____ I own an automobile and it carries a license plate from the state of _____, license number _____. **(Proof of registration required)**

_____ I drive an automobile that belongs to another person. The license plate is from the state of _____. The owner is _____.

_____ I do not own or drive an automobile regularly.

COMMENTS: _____

2. DRIVER'S LICENSE INFORMATION

_____ I do not possess a motor vehicle operator's license.

_____ I do possess a motor vehicle operator's license. My present motor vehicle operator's license was issued by the state of _____. **(Attach Proof)**

COMMENTS: _____

3. INCOME TAX INFORMATION

_____ I did not file a Federal Income Tax return for the past year.

_____ I did file a Federal Income Tax return for the past year in the state of _____. **(Attach Proof)**

COMMENTS: _____

4. INCOME TAX INFORMATION

_____ I did not file a State Income Tax return for the past year.

_____ I did file a State Income Tax return for the past year in the state of _____. **(Attach Proof)**

COMMENTS: _____

5. PERSONAL PROPERTY AND/OR REAL ESTATE TAX INFORMATION

_____ I did not pay personal property tax for the past year.

_____ I did pay personal property tax for the past year to the state of _____. **(Attach Proof)**

_____ I did not pay a real estate tax for the past year.

_____ I did pay a real estate tax for the past year to the state of _____. **(Attach Proof)**

COMMENTS: _____

6. VOTER REGISTRATION INFORMATION

_____ I am not registered to vote.

_____ I am registered to vote in the state of _____. (**Attach Proof**)

COMMENTS: _____

7. HOUSING INFORMATION

_____ I live on campus.

_____ I rent an apartment or house. Lease agreement began on _____ and ends on _____. (**Attach Proof**)

_____ I own a house. (**Attach Proof**)

COMMENTS: _____

8. PARENTAL FINANCIAL ASSISTANCE INFORMATION

_____ I am not receiving financial assistance from my parent(s).

_____ I am receiving financial assistance from my parent(s). Amount & type: _____

_____ My parents' did not list me as a dependent on their last Federal Income Tax return. (**Attach copy of pg 1 of parents W1040**)

_____ My parents' income was taken into account in determining financial aid for University attendance for the current academic year.

_____ My parents' income was not taken into account in determining financial aid for University attendance for the current academic year.

_____ I do not consider myself "emancipated" from my parent(s).

_____ I do consider myself "emancipated" from my parent(s). Reasons and **proof**.

"Emancipated" in this context means "A student whose parent(s) have entirely surrendered the right to the care, custody, and earnings of such student, and who no longer are under any legal obligations to support such a student."

9. EMPLOYMENT INFORMATION: Please list all the places you have worked in Missouri since arriving in Missouri.

Place of employment	Start Date	End Date	Full or Part Time
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- If working please submit a letter from employer stating hire date, full-time or part-time employment and how long employment is expected to last (for instance through the school year or just over summer).

