

Brooklyn, New York 11203

Instructions to Apply for New York State Residency

NOTE: ALL DOCUMENTATION SUBMITTED MUST PERTAIN TO THE LAST 12 MONTHS. SUBMIT PHOTOCOPIES, DO NOT SUBMIT ORIGINAL DOCUMENTS. RETURN A COPY OF THIS SHEET WITH YOUR DOCUMENTS. WE WILL ONLY REVIEW A COMPLETE APPLICATION PACKAGE.

The State University of New York's residency policy states: "...an individual University registrant will be considered a New York State resident and be charged in-state tuition rates when that individual is determined to have had a New York State domicile (i.e., a permanent and principal home in New York, a Residence Hall is not generally considered a permanent home) for a 12 month period prior to registration. Persons who do not meet this 12 month durational requirement will be presumed to be out-of-state residents and should be charged out-of-state tuition rates unless satisfactory proof is presented to show that domicile in New York State has, in fact, been established, notwithstanding the durational requirement."

Institutional Policy: The determination of New York State residency is not based on any one item of documentation. Instead, a number of items are reviewed to verify residency status.

Accepted Applicants who wish to be considered for New York State Residency status must submit documentation to The Office of Admissions 450 Clarkson Avenue, MSC 60, Brooklyn, NY 11203. Continuing students should submit their documentation to The Office of the Registrar, 450 Clarkson Avenue, MSC 98, Brooklyn, NY 11203.

- Only complete applications will be reviewed. A complete application consists of the attached SUNY Application for New York State Residency Status and required documentation as listed below. Return a copy of this sheet with the letters circled below as directed.
- Photocopy all of your supporting documents and submit the entire package (application form + documents) to the Admissions Office (accepted applicants only) or to the Office of the Registrar (matriculated students only). Items submitted separately will not be reviewed, and this will delay a decision on your tuition status for registration.

Please note: The Committee on New York State Residency Status for Tuition Billing Purposes reserves the right to request any and all documentation needed to determine residency status.

All applicants must submit *AT LEAST FOUR (4) POINTS* worth of documents from list below. Place a circle around the alphabet letter of the items you are submitting (total must add up to a minimum of four (4) points. The Committee may request additional documentation upon review of your application.

- 1. Tax Returns (Submit either A or B below) (2 points)
 - a. If you are an Emancipated Student (not financially dependent on another):
 - Copies of your most recent Federal and New York State income tax forms. If you have not yet filed your income tax return for the current year, submit a copy of the

previous year's return and a copy of your W-2 forms for the current year.

- If you are an Un-Emancipated Student (declared as a dependent on income taxes):
 - Copies of your parent's or legal guardian's most recent Federal and New York State income tax forms.
- A notarized copy of your lease or deed in your name and copies of canceled checks or rent receipts covering the prior 12 months.
 Note: If your name is not included on lease or deed, see note below. (1 point)
- Copies of utility bills for 12 prior consecutive months, addressed to you. Utility bills include gas and/or electric only. If utility bills are not in your name, see note below. (1 point)
- Copy of bank statements for 12 prior consecutive months, addressed to you. (1 point)
- A notarized copy of your NYC municipal ID/New York State Driver's License (or New York State Non-Driver's Identification Card) (1 point)
- 6. New York State motor vehicle registration (1 point)
- Proof the applicant receives public assistance from New York State or from a city, county, or municipal agency in New York State (1 point)
- 8. A notarized copy of your New York State Voter Registration Card. If you do not have a copy of your NYS Voter Registration Card, a printed copy can be obtained from the NYS Board of Elections online. Go to http://www.elections.state.ny.gov and click on "Look up your voter registration". (Note that the printed copy must still be notarized.) (1 point)
- 9. An official copy of a transcript or an official letter on school letterhead obtained from a New York State high school showing that you attended that school for at least two complete years and your date of graduation. (Please note that your date of graduation must be within five years of the date you will begin your academic program {not the date you apply for NYS Residency}, and you must not have otherwise lost your residency since your graduation.) (4 points)
- 10. Proof that you are a member of the U.S. Armed Services while you are on full-time active duty in New York State; or that you are a dependent/spouse of a member of the U.S. Armed Services on active duty in New York State. (2 points)

Note: If lease/deed or utility bills are not in your name, but you are living at the address, you must also obtain a notarized letter from the person whose name appears on the lease/deed or utility bill stating that you live at that location and how long you have lived at that location. If the person listed is not a parent/guardian, you must also submit an explanation on how you cover the expenses (i.e., paying rent directly to the lease-holder, etc.) You must also still submit the documents described above in the other person's name. All other items of proof must be in your name.



2025-2026 APPLICATION NEW YORK STATE RESIDENCY STATUS FOR TUITION BILLING PURPOSES

Section A: All information in Section A must be completed

College/Program:				
Student ID Number (if available):		NYS County of Residence: _		
Last Name	First Na	ame	Middle Name	
Street			Apt. Number	
City	State	Zip		
Phone		Email		
Length of time at this address (insert figures):	Years	/ Months		
If less than three years, list your prior addresses by	pelow			
Address 1				
Street			Apt. Number	
City	State	Zip		
Length of time at this address (insert figures):	Years	/ Months		
Address 2				
Street			Apt. Number	
City	State	Zip		
Length of time at this address (insert figures):	Years	/ Months		

Address 3				
Street			Apt. Number	
City	State	Zip		
Length of time at this address (insert figures):	Years	/ Months		
Local Address (if different from above)				
Street			Apt. Number	
City	State	Zip		
Age: Date of Birth (mm/dd/yyyy):	Marital Status:		
Citizenship: ☐ US ☐ Other (if other; visa type):			
If you are a permanent resident of the U.S., list you	ır alien registratic	on number: A	Date Issued (mm/dd/yyyy):	
Are you a first time SUNY Downstate student? $\ \square$	Yes 🗖 No	If no, previous enrollme	ent status: 🗖 Undergraduate 📮 Graduate	
Have you received a state award (Tuition Assistance	e Program, Rege	ents Scholarship, Empire Sta	te Fellowship Challenger)? 🗖 Yes 📮 No	
Have you had or will you be applying for a Stafford	or Direct Federal	l Student Loan (formerly the	Guaranteed Student Loan)? ☐ Yes ☐ No	
Do you have a driver's license or state-issued ID ca	ard? 🗆 Yes 🗅	l No If yes, in wh	at state was your license issued?	
Date leaved (may (dd (co.c.))		Daire de Lieure Neueleur		
Date Issued (mm/dd/yyyy):	L	Driver's License Number:		
Do you own a car? ☐ Yes ☐ No If yes, ir	າ what state is yo	our car registered?		
License Plate Number:		Registration Date	(mm/dd/yyyy):	
Are you a registered voter? ☐ Yes ☐ No	If you in	what state		
AND YOU A TEGISTETEU VOICET! IF TES INV	ii yes, iii	i wiiat state		
In what state did you (or your spouse) file resident	taxes for 2024?		Where will you file for 2025?	

Section B: If financially dependent on your parents, skip this section and have parents complete Section C

Did you	or will you	live in a	an apartment, house	e or building owned or leased by your pare	ents for more than six (6) weeks during	
	2024?	☐ Yes	s 🗖 No			
	2025?	☐ Yes	s 🗖 No			
Were yo	u or will yo	ou be cla	aimed as a depende	nt on another (e.g., your parent's) federa	I or state income tax return for	
	2024?	☐ Yes	s 🗖 No			
	2025?	☐ Yes	s 🗖 No			
Are you	an emanc	ipated r	minor adult student v	who is financially independent from parel	ntal support?	
	If yes, w	vhen did	d you become indepe	endent? (mm/yy)		
List belo	w the sou	rces of	financial support for	the last two (2) years.		
From	1		То	Name and Address of Employer		Hours Worked Per Week
r not en	npioyea, p	iease iis	st your financial reso	ources:		
	nt's Affirma		on a resident of New	Vouls Ctata and that it is my intention to	consis in Navy Vayl, Ctate, and that all information man	avided on this forms and
attachm	ents there	eto, is a	ccurate, complete ar	nd true to the best of my knowledge. I un	emain in New York State, and that all information pr derstand that providing false information knowingly	
conside	ration for I	New Yor	k State residency st	atus.		
Signati	ure				Date (mm/dd/yyyy)	

Do not forget to fill out and sign Section D, regardless of whether you must fill out section C or not.

Section C: To be completed by the person who claimed or will claim you as a dependent for income tax purposes in 2024 and 2025

Name:		Relationship:				
Street			Apt. Num	lber		
City	State	Zip				
Phone	Er	mail				
ength of time at this address:	Years	Months				
citizenship: 🗖 US 🗖 Other	If other, please specif	y:				
Please list states in which you filed or	will file resident taxes during:					
2023:	2024:		2025:			
Affirmation:						
do hereby affirm that the above infor	mation provided is accurate,	complete and true to	the best of my knowledge.			
Signature			Date (mm/dd/yyyy)			

Section D: Applicant's Affirmation

The following affirmation statement m	ust be completed and r	notarized before a No	tary Public:		
STATE OF NEW YORK) ss	COUNTY OF)	
I, New York, and that all information pro	, the applica vided on this form and	ant herein, being duly any attachments the	sworn, do hereby affirm t eto, is accurate, complete	nat I am a bona fide legal resident and true to the best of my knowl	t domiciled in the State of edge.
Signature of Applicant			_		
Sworn to before me this		_			
day of	, 20	_			
Notary Public					