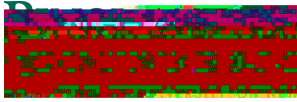


	<p style="text-align: center;">State University of New York Application For New York State Residency Status/Resident Tuition PART B</p>
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STUDENT AFFIDAVIT OF INTENT TO LEGALIZE IMMIGRATION STATUS



**State University of New York
Application For New York State Residency Status/Resident Tuition
PART C**

Section 1 must be completed by the student.

Section 2 must be completed if you are an INDEPENDENT student.

Section 3 must be completed if someone other than yourself or your spouse claims you as a dependent for tax purposes.

Section 1 - Must be completed by the student applicant.

BU Student ID (B#): _____ County of Residence: _____

First: _____ Middle: _____ Last: _____

Age: _____ Date of Birth: ____/____/____ Marital Status: Single Married

Telephone Number: () _____ - _____ BU Email Address: _____

Legal Address Street: _____ City: _____ State: _____ Zip: _____

Length of time at this address: Years ____/Months ____ If less than three years, list your prior addresses below

From	To	Street	City	State

Local address and telephone number (if different from above): _____

State Identification and Vehicle Information:

Do you have a Driver's License? Yes No If yes, in what state: _____ (Attach Copy) Date Issued ____/____/____

Do you have a state issued Identification Card? Yes No If yes, in what state: _____ (Attach Copy) Date Issued ____/____/____

Do you own a vehicle? Yes No If yes, state of registration: _____ (Attach Copy) Date Issued ____/____/____

Will you be registering a vehicle with Parking Services? Yes No If yes, state of registration: _____ (Attach Copy)

Plate Number: _____ Owner: _____ Registration Date: ____/____/____

Voter Registration Information:

Are you a registered voter? Yes No If yes, state of registration: _____ Registration Date: ____/____/____ (Attach Copy)

Section 2 - Must be completed by student applicants claiming independent status. Individuals under the age of 24 are generally not eligible for independent status. Students claiming financial independence must also provide documented evidence of financial self-sufficiency.

Are you an emancipated minor or student who is financially independent from parental support? Yes No

If yes, when did you become independent? Date: ____/____/____

Amount of financial support provided to you by parents or guardians during the prior and current year:

Year: 20 ____ \$ _____ Year: 20 ____ \$ _____

Were you claimed as a dependent on your parents Federal or State income tax return for the prior year? Yes No

Will you be claimed as a dependent on your parents Federal or State income tax return for the current year? Yes No

List the state(s) in which you filed resident taxes during the last two years: Year: 20 ____ State(s) ____ Year: 20 ____ State(s) ____

List the state(s) in which you have filed or will file resident taxes for the current year: Year: 20 ____ State(s) ____

(Attach complete copies of the previous year's Federal and State Income Tax Return statements)

