



RESIDENCY QUESTIONNAIRE

Requesting Reclassification Beginning:	<input type="checkbox"/> Fall _____ <input type="checkbox"/> Winter _____ <input type="checkbox"/> Spring _____ <input type="checkbox"/> Summer _____ <small>Year Year Year Year</small>	ID# G00: _____
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PART A – STUDENT INFORMATION (PLEASE PRINT LEGIBLY)

Print Full Name: _____
Last First Middle

Age:	Birthdate:	Birthplace:	Social Security Number:	Are you a Citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No
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When did your present stay in California begin?	Permanent Legal Address (No P.O Boxes): <small>Number Street City State Zip</small>
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Contact Phone Number:	Email:
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Have you lived in California continuously since birth? Yes No (If "no" list your address for the past two years, with dates below):

(A) _____ From ____/____/____ to ____/____/____
 (B) _____ From ____/____/____ to ____/____/____
 (C) _____ From ____/____/____ to ____/____/____

Do you have dependent Children? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, what are the ages? _____	Do they attend pre-school or school in California? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you married? <input type="checkbox"/> Yes <input type="checkbox"/> No
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If yes, Spouse's Name: <small>Last First</small>	Indicate all sources of your financial support for the past year, and estimate the percentage of total income received from each (must total 100%): Parents ____% Financial Aid ____% My Employment ____% Others-List each: _____%
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PART B – LIVING WITH PARENT OR YOUNGER THAN 19 AND UNMARRIED (TO BE COMPLETED BY STUDENT)

1. (A) Mother's Name: _____ (B) Is your mother living? Yes No Date Deceased: ____/____/____

If the answer to (B) was "yes", answer the following questions:

Is your mother a U. S. Citizen? Yes No
 If "no", what is her immigration status? _____
 Mother's permanent address: _____
 If in California, for how long? _____

2. (A) Father's Name: _____ (B) Is your father living? Yes No Date Deceased: ____/____/____

If the answer to (B) was "yes", answer the following questions:

Is your father a U. S. Citizen? Yes No
 If "no", what is his immigration status? _____
 Father's permanent address: _____
 If in California, for how long? _____

3. (A) Where do you live? with Mother with Father Somewhere Else
 (B) If you do not live with either parent, are you under continuous and direct care and control of any person or persons other than a parent? Yes No
 *If "Yes" give name and address of such person: _____
 *How long have you been continuously under this person's direct care and control? _____

PART C – CITIZEN/IMMIGRATION STATUS (TO BE COMPLETED BY STUDENT)

Permanent Resident Temporary Resident Refugee/Asylum Student Visa DACA Undocumented Other: _____



RESIDENCY, EASY AS 1, 2, 3.

BRING DOCUMENTS AS STATED FROM EACH SECTION 1 AND 2, OR 3.

PLEASE NOTE:

The burden of proof is on the student to clearly demonstrate both physical presence in California and intent to establish California residence. You are required to present evidence in accordance with Education Code Sections 68040 et. Seq. and Title 5 §54032.

The documents must be valid, readable, dated at least one year and one day before the residency determination date for the semester in which you are planning to attend, and be properly identified with respect to student name and address.

Specific requirements depend on whether you are a Dependent or Independent student, in some cases, two (2) years of documentation is required. Contact an Admissions & Records Technician for additional information at (760) 355-6101. You may also refer to the IVC Catalog (Residency) for further information.

1 PHYSICAL PRESENCE:

Choose one (1) of the following documents issued over a year before the start of the semester:

- Proof that you or your spouse own where you have lived in California for at least one year and one day before the first day of the term.
- Proof that you or your spouse lease or rent the place(s) where you have lived in California for at least one year and one day before the first day of the term.

AND one (1) of the following documents issued over a year before the start of the semester:

- Utility bills (gas, water, power, telephone) showing your name and/or your spouse's name and the address(es) where you have lived.
- Proof of benefits from a CA agency (such as SSI, California Health Insurance) for you or your spouse with a California address showing benefits or to be used in conjunction with another method of proof (i.e. Passport to Services + Unemployment = over a year).
- Employment pay stubs with your California Address (Cannot be PO Box)
- California property taxes provided you live in the residence.

2 INTENT:

Two (2) of the following documents issued over a year before the start of the semester:

- Federal or state income taxes filed and signed by you showing a CA address and your name as a filer.
- CA bank statements in your name and showing your address of active checking, savings, and/or credit card accounts showing activity, or a statement from the bank verifying when the account was opened and that it is still active.
- CA Vehicle Registration.
- CA Driver's License and/or CA Identification Card with current address (cannot be PO Box).
- CA Voter Registration.
- CA occupational license (such as welding, nursing, home, healthcare, EMT)
- CA fishing or hunting license.
- Selective service registration with a CA permanent address.

3 MILITARY PERSONNEL ONLY:

Two (2) of the following documents issued over a year before the start of the semester:

ACTIVE

- Military ID Card (do not make a copy, must bring original as it must be shown to Technician).
- Copy of military orders showing duty assignment in California.

DISCHARGED

- If discharged within the last three years, DD214 showing CA as home of record (discharged over three year, please refer to Column 1 & 2).
- Leave and earning statement showing CA as home of record.
- Valid state or federal identification card.

For Dependent students 19 years of age or younger, you may need to provide parents' documentation from Columns 1 & 2.

****COPIES ONLY MUST BE ATTACHED.**



RESIDENCY QUESTIONNAIRE

DECLARATION

I declare under penalty of perjury under the laws of the State of California that the information I have provided on and attached to this document is true and correct to the best of my knowledge. I understand that withholding and/or providing false/misleading information to a California Community College may not only result in college dismissal & disciplinary action but may also be a criminal offense punishable by fine and/or imprisonment. I understand that if it is determined I do not meet the requirements to be classified as a resident, I will be responsible for payment of nonresident tuition unless classes are dropped by the appropriate refund date as listed in the current Class Schedule.

Yo declaro bajo pena de perjurio en conformidad con las leyes del estado de California, que la información que he proporcionado en, y adjuntado a este documento es verdadera a mi mejor conocimiento y creencia. Entiendo que omitir información y/o proporcionar información falsa/engañosa a una Universidad del Estado de California puede no solo dar como resultado acción disciplinaria y expulsión, sino que también puede ser una ofensa criminal, sujeto a castigo por la ley con multa y/o encarcelamiento. Entiendo que, si se determina que no cumplo con los requisitos para ser clasificado como residente, seré responsable por el pago de la matrícula como no-residente, a menos que las clases sean dadas de baja antes que la fecha de reembolso expire, cual se especifica en el actual programa de clases.

Student Signature _____

Date: _____

FOR OFFICE USE ONLY

Classified by:

_____ Date: ____/____/____
Last First Middle

Decision: Resident Non-Resident

Follow ups:

Date: ____/____/____

Update Checklist:

- SPACMNT UPDATED SYOSPROFILE REVIEWED SGASTDN UPDATED TSAAREV REVIEWED