

MENDOCINO COLLEGE

Supplemental Residency Question Form
Residence Reclassification Request Form

OFFICE USE ONLY
ACTION:
Classification __R __NR
Reclassification: __R __NR
By _____ Date _____

The information requested is deemed relevant and necessary to properly determine your residence status for tuition purposes. Complete both sides of this form: failure to answer all questions may cause you to be classified as a nonresident. You may submit other information that you believe will establish your California Residency. A summary of the regulations is available upon request.

Name _____ Social Security Number _____
Present Address _____ Birth Date ____/____/____ Age _____
Month Day Year
Phone Number () _____

- 1. What state do you regard as your permanent home?
2. If California, when did your present stay begin?
3. List the dates and places you lived, and the parent with whom you lived before present stay in California began.
FROM TO STATE PARENT

4. Citizen status (check one)
__ U.S. Citizen __ F Visa
__ Permanent __ Refugee/Asylee
__ Resident (I-551) __ Other Visa
__ Amnesty Recipient __ None of the above
Visa/Alien Number:
Issue Date:
Month / Day / Year

5. Are you claimed as a dependent on the military record of any member of the U.S. armed forces? __ Yes __ No
If yes, explain relationship and answer No. 7 as it pertains to the serviceperson

6. If you will be 19 years of age or older by the residence determinate date (one year prior to the first day of the term), answer numbers 7 through 18 as they pertain to you. If you will be younger than 19 years of age by the residence determinate date, answer this item about the natural or adopted parent with whom you most recently resided, or if both parents are deceased, about your legal guardian: answer numbers 7 through 18 as they pertain to the parent or guardian whose name you will provide below:

Name _____ Relationship _____
State regarded by that person as permanent home _____
Permanent address _____
Present actual whereabouts _____
How long (continuously) living in California, if at all _____

7. Member or veteran of U.S. armed forces? __ Yes __ No Date joined ____/____/____ from what state _____
Most recent permanent address on military records _____
Where stationed _____ Date separated _____
And dates _____ active duty, if any ____/____/____

8. Ever registered to vote? __ Yes __ No State _____ Date Registered ____/____/____ Date Last Voted ____/____/____

9. Do you possess a valid driver's license? __ Yes __ No State _____ Date Issued ____/____/____ License Number _____

10. Current registration of all motor vehicles owned State _____ Date Issued ____/____/____

