



9. Do you possess a valid drivers license?  Yes  No State \_\_\_\_\_ Date Issued \_\_\_/\_\_\_/\_\_\_ Number \_\_\_\_\_
10. Current registration of all motor vehicles owned \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
State Month/Year State Month/Year
11. Are all personal effects located in California?  Yes  No If "No", attach explanation.
12. List the state and year in which the last three state income tax returns were filed on total income.
- |       |       |       |       |       |       |
|-------|-------|-------|-------|-------|-------|
| _____ | _____ | _____ | _____ | _____ | _____ |
| State | Year  | State | Year  | State | Year  |
13. Purchase date(s) and location(s) of California real property owned.
- |       |          |       |          |       |          |
|-------|----------|-------|----------|-------|----------|
| _____ | _____    | _____ | _____    | _____ | _____    |
| Date  | Location | Date  | Location | Date  | Location |
14. Purchase date(s) and location(s) of other real property owned.
- |       |          |       |          |       |          |
|-------|----------|-------|----------|-------|----------|
| _____ | _____    | _____ | _____    | _____ | _____    |
| Date  | Location | Date  | Location | Date  | Location |
15. Source of financial support for the past year \_\_\_\_\_
16. Were you employed in California in the last year?  Yes  No
- |          |                       |                       |
|----------|-----------------------|-----------------------|
| _____    | _____ / _____ / _____ | _____ / _____ / _____ |
| Employer | From                  | To                    |
17. Address shown on current W-2 form \_\_\_\_\_
18. Active California banking account(s) \_\_\_\_\_
- |       |                       |
|-------|-----------------------|
| _____ | _____ / _____ / _____ |
| Bank  | Date Opened           |
| _____ | _____ / _____ / _____ |
| Bank  | Date Opened           |

**Student Financial Independence Status**

Education Code Section 68044 requires that the financial independence of a non resident student seeking reclassification as a resident be included in the factors to be considered in the determination of residence. Therefore, please answer all of the following questions.

- Will your parent(s) claim you as a dependent exemption for state and federal tax purposes for the current calendar? .....  Yes  No
- Were you claimed as an exemption for State and federal purposes by your parent(s) in any of the past three calendar years? .....  Yes  No
- Have you received or will you receive more than \$750 per year in financial assistance from your parent(s) in the current calendar year? .....  Yes  No
- Did you receive more than \$750 per year in financial assistance from your parent(s) in any of the three past calendar years?.....  Yes  No
- Have you lived or will you live for more than six weeks with your parent(s) during the current calendar year? .....  Yes  No
- Did you live for more than six weeks with your parent(s) during any of the three past calendar years? .....  Yes  No
- Are your parent(s) California residents? .....  Yes  No

**Certification - To be read and signed by all students completing this form**

I certify under penalty of perjury, or after first being duly sworn, that the foregoing statements and any other information submitted by me in connection with the determination of my residence are true, complete and accurate. I certify (swear) that so long as I am a student at this institution, I will advise the residence clerk if there is a change in any of the facts upon which the residence determination was made, such as the state of residence and military status of my parent(s) if I am a minor, or, if not, changes in any of the above for me or my spouse. I authorize release of any information submitted by me in connection with my application for admission and determination of residence to any person, firm, corporation, association or government, whether federal, state, local or foreign, but only as necessary to verify or explain the information, to obtain pertinent records, or in connection with perjury proceeding.

Signed at: \_\_\_\_\_  
City County Applicant's Signature Date