

Applicant's Name: _____ SSN: _____

Do you wish to be considered for in-state tuition status? Yes No (If yes, follow the instructions below.)

IF ANY OF THE CATEGORIES BELOW APPLY: A. Please check the appropriate box B. provide requested information and documents, C. Skip to item 10.

- I am a part-time (50%) or full-time regular employee of the University System of Maryland or, I am the spouse of, or am financially dependent upon a parent or legal guardian who is, a regular employee of the University System of Maryland.
Please indicate relationship: _____
Please attach a letter of verification from the Human Resources Office of the campus at which you or your spouse or parent or legal guardian is employed.
- I am a full-time active member of the U.S. Armed Forces whose home of residency is Maryland or one who resides or is stationed in Maryland, or the spouse or a financially dependent child of such a person. Please attach a copy of your deed or lease (if applicable), or verification from the service that you have declared Maryland as your "home of residency" (if applicable); and the most recent assignment orders. Also, please indicate date of expected separation from the military _____.
- I am a veteran of the United States Armed Forces who received an honorable discharge within the past 12 months and received my high school education in Maryland. Please attach a copy of form DD-214 and documentation of enrollment in a Maryland high school for a minimum of three years, and, graduation from a Maryland high school or receipt of a GED diploma in Maryland.

If none of the above is checked, applicants seeking in-state status must complete the following questions. Failure to complete all of the required items may result in a non-Maryland resident classification and out-of-state charges being applied. Residency classification information is evaluated in accordance with the University System of Maryland policy on residency. The applicant may be contacted for clarification of an item, or for additional information as necessary.

PLEASE CHECK ONE:

- I am financially independent. I have earned taxable income and I have not been claimed as a dependent on another person's most recent income tax returns.
- I am financially dependent on another person who has claimed me as a dependent on his/her most recent income tax returns, or I am a ward of the State of Maryland. If a ward of the State, please submit documentation and skip to item 10.
- Name of person upon whom dependent **and** relationship to applicant: _____
- How long have you been dependent upon this person? _____
- Is the person a resident of Maryland? Yes No
Complete address of this person: _____
- Is this person a citizen of the United States? Yes No
 - i. If no, type of visa: _____
 - ii. Expiration date of visa: _____
 - iii. Alien Registration No. _____
 - iv. Date of Issuance: _____
- Has this person filed a Maryland state income tax return for the most recent year on all earned income including income earned outside of Maryland? Yes No
If yes, list actual years Maryland income tax returns have been filed within the past 3 years. (Example: 2004, 2005, 2006) Years filed: _____
ii. If a Maryland tax return has not been filed within the last 12 months, state reason(s): _____
- Signature of this person: _____

The Student Applicant is responsible for completing items 1 - 10.

1. Permanent address: _____
Length of time at permanent address ____ years ____ months
If less than 12 months, provide previous address: _____
Length of time at previous address ____ years ____ months

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|---|--|
| 2. Are you residing in Maryland primarily to attend an educational institution? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Are all or substantially all of your possessions in Maryland? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. Do you possess a valid driver's license? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| a. If yes, initial date of issue _____ | b. In what state? _____ |
| c. Most recent date of issue _____ | d. In what state? _____ |
| 5. Do you own any motor vehicles? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| a. If yes, initial date of registration? _____ | b. In what state? _____ |
| b. Most recent date of registration _____ | d. In what state? _____ |
| 6. Are you registered to vote? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| a. If yes, in what state? _____ | b. Date of registration: _____ |
| c. Were you previously registered to vote in another state? _____ | |
| 7. Have you filed a Maryland state income tax return for the most recent year? If yes, list years you have filed Maryland income tax returns within the past 3 years. (Example: 2004, 2005, 2006) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| a. Years filed: _____ | |
| b. If you did not file a tax return in Maryland within the last 12 months, state reason(s): _____ | |
| 8. Is Maryland state income tax currently being withheld from your pay? If no, provide explanation. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 9. Do you receive any public assistance from a state or local agency other than one in Maryland? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| a. If yes, please explain _____ | |

I certify that the information provided is complete and correct. I understand that the Coppin State University reserves the right to request additional information if necessary. In the event the University discovers that false or misleading information has been provided, the Student Applicant may be billed by the University retroactively to recover the difference between in-state and out-of-state tuition for the current and subsequent semesters.

10. _____
Signature of Applicant Date