

# INSTRUCTIONS FOR COMPLETING A PETITION FOR CHANGE IN RESIDENCY STATUS

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Please **carefully** read the "Policy for Student Residency Classification for Admission, Tuition and Charge-Differential Purposes" of the University System of Maryland, which contains residency requirements, procedures, and appeal information.

Submit the completed petition and all supporting documentation to the following address (faxes not accepted):

FOR NEW STUDENTS:

Chairperson for the Coppin State University Residency Appeals Committee  
Coppin State University  
2500 W. North Avenue  
Baltimore, MD 21216-3698

FOR CONTINUING STUDENTS:

Records Office  
Coppin State University  
2500 W. North Avenue  
Baltimore, MD 21216-3698  
ATTN: Dr. Margaret Turner

## IMPORTANT INFORMATION REGARDING PETITIONS

- The petition deadline is the last day of late registration for the semester for which you are seeking in-state status.
- Failure to complete all applicable sections of the petition may result in a denial of in-state status.
- Only one petition may be filed per semester.
- No requests are accepted for retroactive changes.
- No materials or documentation will be returned after the petition is submitted.
- The review of the petition and an initial determination of the status may take as long as six (6) weeks, not including subsequent appeals. You will be responsible for all late fees and finance charges during the entire process.
- Read the document carefully and complete all sections of the petition that apply to you.
- If you cannot provide the required information, you must attach a separate sheet with an explanation or write your explanation in the margins of the petition.
- If claiming dependence, the person upon whom the student is dependent must have his/her signature notarized. (if institution has notary services available for these purposes, it may be noted here)
- In the cases where affidavits are accepted, they must be typed, dated, notarized, and contain information as specific as possible including dates, addresses, amounts, etc. Please check in advance.
- Please note: Graduate Assistants who are not residents of Maryland are not classified as in-state, but are accorded some benefits of in-state status, and must see the Human Resources Office if they are having a billing problem. All graduate students, including graduate assistants, who wish to establish their status as permanent residents of Maryland, may file a petition.

### Section 1: Student Information

This section must be completed by all student petitioners for in-state status.

### Section 2: Basis for claiming In-State Status

This section must also be completed by all student petitioners for in-state status. It is recommended that you again read the residency policy. Please pay particular attention to the definitions of financial independence, dependence, and support. The student petitioner must complete all sections of the petition regardless of dependence status.

### Section 3: Income and Expense Information for Student

This section must be completed by all students who indicated either A or B in Section 2. Please be sure to include with your petition documentation for all sources of funds you list in this section. Any undocumented sources of funds cannot be considered. In most cases, acceptable forms of documentation are W-2 forms, check stubs showing year-to-date income, financial aid award letters, employer confirmation of employment dates and

income on employer letterhead, and employment contracts. The purpose of this section is to aid the University in determining financial dependence or financial independence.

If you are seeking to demonstrate financial independence, that independence must exist for twelve (12) consecutive months prior to the last day of late registration for the semester you are seeking in-state status. For example, if you are filing a petition for the fall semester, the last day of late registration usually occurs in mid-September. Therefore, the twelve (12) months prior to that date will be the period reviewed. If you have filed a petition prior to the deadline, you may estimate future income; however, you must be able to explain the basis for your estimate. If you are uncertain about your exact expenses, please carefully estimate. Your figures regarding rent/mortgage, tuition and fees, utilities, and motor vehicle insurance should be exact; however, if exact figures are not available, please provide an explanation. Please list all employers for the past two (2) years, with specific dates of employment.

**Section 4: Student Residency Information**

The student petitioner must complete Section 4. Please make sure to attach photocopies of all requested documents. Students must complete this section even if claiming financial dependency upon another resident of the State of Maryland.

**Section 5: Residency Information for Person Upon Whom Student is Financially Dependent**

The person upon whom the student petitioner is financially dependent must complete Section 5. Please make sure to attach photocopies of all requested documents. Students not claiming financial dependence upon another resident of Maryland should NOT complete this section of the petition.

**Section 6: Information Pertaining to Full-Time Member of the Armed Forces of the United States**

Please review the residency policy before completing this section.

**Section 7: Affirmation of Petitioner and, if Dependent, of the Person Upon Whom Student is Financially Dependent**

The student petitioner must sign this section but a notarized signature is not required. A NOTARIZED signature is required of the person upon whom the student petitioner is financially dependent.

**UNIVERSITY SYSTEM OF MARYLAND**  
**PETITION FOR CHANGE IN RESIDENCY CLASSIFICATION FOR ADMISSION, TUITION AND CHARGE DIFFERENTIAL**

**DIRECTIONS:** This form is intended for use by those who seek a change in residency classification or by those whose status cannot be determined from the information submitted with the application for admission. THE DEADLINE for which conditions for in-state classification must be met is the published last date to register for the semester for which in-state status is being sought. Only one petition for change in status may be filed per semester. All petitioners must complete Section 1 (Student Information), Section 2 (Basis for claiming in-state status), and Section 7 (Affirmation). Other sections to be completed are indicated in Section 2.

**SECTION 1: STUDENT INFORMATION** (To be completed by Petitioner/Student)

Institution: \_\_\_\_\_

Program (please check one):  Undergraduate  Graduate  Professional  Other \_\_\_\_\_

Semester & Year Admitted: \_\_\_\_\_

Current Class Status:  Freshman  Sophomore  Junior  Senior  Grad  Professional

- (1) Name: Mr. \_\_\_\_\_ (2) Social Security Number: \_\_\_\_\_  
Ms. \_\_\_\_\_  
Last First MI
- (3) Address: \_\_\_\_\_ (4) Date of Birth (mm/dd/yy): \_\_\_\_\_  
Street
- (5) Home Telephone: \_\_\_\_\_  
(6) Work Telephone: \_\_\_\_\_  
City State Zip
- (7) Semester:/Year of Petition: \_\_\_\_\_ (8) E-Mail: \_\_\_\_\_
- (9) Have you filed a residency petition before?  Yes  No If yes, indicate semester and year: \_\_\_\_\_
- (10) Are you financially dependent upon another person?  Yes  No  
a) If yes, name of person upon whom you are financially dependent: \_\_\_\_\_  
b) Is this person a Maryland Resident?  Yes  No

**SECTION 2: BASIS FOR CLAIMING IN-STATE STATUS** (To be completed by Petitioner/Student)

**Check only one:**

- A) I am seeking in-state status because I am a permanent Maryland resident.  
**Complete sections 3, 4, and 7. If you answered yes to question (10)(b) in Section I, that person must complete section 5.**
- B) I am seeking in-state status because I am a full-time or part-time (50%) regular employee of a University System of Maryland institution, or the spouse or financially dependent child of such an employee.  
**Complete Section 7 and provide verification of employment. If you are a spouse or financially dependent child of an employee, provide documentation, i.e., marriage certificate, birth certificate, or court order of adoption, and a copy of the most recent federal and state income tax returns of the person upon whom dependent.**
- C) I am seeking in-state status because I am a full-time member of the U.S. Armed Forces, residing or stationed in Maryland, or whose home of residency is Maryland, or the spouse or dependent child of such a member of the armed forces.  
**Complete Sections 6 and 7 and provide requested documentation. If you are a spouse or financially dependent child of a full-time member of the U.S. Armed Forces, provide documentation, i.e., marriage certificate, birth certificate, or court order of adoption, and a copy of the most recent income federal and state tax returns of the person upon whom dependent.**

**SECTION 3: INCOME AND EXPENSE INFORMATION OF STUDENT (To be completed by Petitioner/Student)**

**Support and Expense Information During the Past Twelve Months**

<b>Student's Sources of Funds and Other Support</b>	<b>Total prior 12 months Indicate Dates</b>	<b>Student's Expenses</b>	<b>Total prior 12 months Indicate Dates</b>
Please Be as Specific as Possible		Please Be as Specific as Possible	
Self-Generated Income		Rent or Mortgage <sup>3</sup>	
Father's Contribution		Tuition and Fees Specify full or part-time/credit hrs. _____	
Mother's Contribution		Books and Supplies	
Legal Guardian		Food	
Spouse		Transportation <sup>4</sup> _____	
Other Person Providing Support _____		Utilities (phone, water, electric, etc.)	
Loans <sup>1</sup>		Motor Vehicle Insurance	
Savings		Other Insurance	
Gifts (estimated value)		Clothing	
Trusts		Recreation	
Social Security &/or VA Benefits		Motor Vehicle Payments	
Alimony &/or Child Support		Medical	
Scholarships and Grants <sup>1,2</sup> _____		Dental	
Other (describe) _____ _____		Miscellaneous (describe) _____	
<b>TOTAL</b>		<b>TOTAL</b>	

<sup>1</sup> Identify type and source.

<sup>2</sup> If you receive scholarship or grant funds from a state other than Maryland, indicate state.

<sup>3</sup> If you share living quarters with parents, estimate the fair market value of housing costs.

<sup>4</sup> If you had use of a motor vehicle registered in another person's name, indicate name and relationship.

**List all employers (most recent first) for the past 2 years. Use a separate sheet if necessary.**

<b>Name of Employer</b>	<b>Address (City and State)</b>	<b>Period Employed (mm/dd/yy)</b>

**• PLEASE ATTACH DOCUMENTATION OF ALL SOURCES OF INCOME FOR THE PREVIOUS 12 MONTHS AND A COPY OF THE STUDENT'S MOST RECENT FEDERAL AND STATE INCOME TAX RETURNS.**

**SECTION 4: STUDENT RESIDENCY INFORMATION**

*Items correspond to the policy requirements established by the USM Board of Regents. (To be completed by the Petitioner/Student)*

(1) Are you residing in Maryland primarily to attend an educational institution?  Yes  No  
**If yes, proceed directly to Section 7.**

(2) If you were admitted as a freshman or transfer student, indicate name(s) of high school(s) attended:

Address: \_\_\_\_\_  
Street City State Zip

- **Please attach a statement/explanation (not to exceed one typed page) regarding circumstances that brought you to the State of Maryland.**

(3) Did you own or rent and occupy living quarters in Maryland during the entire 12 month period prior to the deadline?  Yes  No If no, please attach explanation.

- **Please attach a photocopy of your deed(s) or lease agreement(s) or affidavit as allowed by policy, and cancelled rent checks (front and back of checks-if cancelled checks are not available or applicable, submit evidence of payment from your rental agent) for the twelve (12) months prior to the deadline, or evidence of residing with a spouse, parent or legal guardian.**

**List residence(s) for the 12-month period prior to the deadline.**

Address (Street Address, City and State)	Dates Owned or Rented and Occupied (mm/dd/yy)

(4) Are all, or substantially all, of your possessions (including bank accounts) in the State of Maryland? \_\_\_\_\_  
 If not, please attach explanation.

(5) Income Tax Information: For the last 2 years prior to the deadline, list the following information regarding federal and state income taxes (if necessary, attach a supplemental sheet):

<b>Income Tax Returns</b>	<b>Year(s) Filed</b>
Federal	_____
State [indicate state(s)]: _____	_____

- **Please attach photocopies of your federal and state income tax returns with all attachments and W-2 forms for the tax year ending within the 12-month period prior to the deadline. If you did not file income tax, indicate reason.**

(6) Motor Vehicle Registration: Do you own or have you owned any vehicle(s) during the 12 months prior to the deadline? \_\_\_\_\_ If yes, for each owned motor vehicle, please provide the following information (if necessary, attach a supplemental sheet):

Year, Vehicle Make & Model	State of Registration(s) (For the past 12 months)	Date of Vehicle Purchase	Currently Owned? If not, date vehicle sold.

- **Please attach photocopy of the registration(s) and title(s) of all vehicles listed; if sold, a photocopy of the Bill of Sale.**

(7) Motor Vehicle Operator's License:

- a) Do you possess a Maryland driver's license?  Yes  No If yes, date issued: \_\_\_\_\_
- b) Have you possessed a driver's license in any other state?  Yes  No If yes, state? \_\_\_\_\_  
Date issued: \_\_\_\_\_
- c) Has your driver's license been renewed in the last 12 months?  Yes  No
  - **Please attach a photocopy of any driver's license you currently possess.**

(8) Voter Registration

- a) Are you currently registered to vote?  Yes  No If yes, in what state? \_\_\_\_\_
- b) Have you been registered to vote in any other state during the twelve month period directly prior to the deadline?  Yes  No

- **Please attach a photocopy of your voter's registration card(s) for the past 12 months.**

(9) Have you received public assistance in the twelve months prior to the deadline from a state other than the State of Maryland or from a city, county or municipal agency other than one in Maryland?  Yes  No  
If yes, please indicate source and type of assistance: \_\_\_\_\_

(10) Citizenship Status

a) Are you a citizen of the United States?  Yes  No (If no, complete b and c, or d or e)

b) Country of Citizenship: \_\_\_\_\_

c) Visa Type: \_\_\_\_\_ Alien Registration Number \_\_\_\_\_  
Date of Issue: \_\_\_\_\_ Expires: \_\_\_\_\_ ▪ **Please attach a photocopy of visa.**

d) Are you a permanent resident? \_\_\_\_\_ Alien Registration Number: \_\_\_\_\_  
Date of Issue: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

- **Please attach a copy of Permanent Resident Card (front and back) that covers the entire twelve (12) month period.**

e) Other (please explain): \_\_\_\_\_

**SECTION 5: RESIDENCY INFORMATION FOR PERSON UPON WHOM STUDENT IS FINANCIALLY DEPENDENT** (To be completed by the person upon whom the petitioner is dependent.)

(1) Did you own or rent and occupy living quarters in Maryland for the 12 months prior to the deadline? \_\_\_\_\_  
If no, please attach explanation.

- **Please attach a photocopy of your deed(s) or lease agreement(s) or affidavit as allowed by policy, and cancelled rent checks (front and back of checks-if cancelled checks are not available or applicable, submit evidence of payment from your rental agent) for the twelve (12) months prior to the deadline, or evidence of residing with a spouse, parent or legal guardian.**

**List residence(s) for the 12-month period prior to the deadline.**

Address (Street Address, City and State)	Dates Owned or Rented and Occupied (mm/dd/yy)

(2) Are all, or substantially all, of your possessions (including bank accounts) in the State of Maryland? \_\_\_\_\_  
If not, please attach explanation.

(3) Will you claim or have you claimed as a dependent the student seeking in-state status on your federal income tax returns for the tax year(s) during the 12-month period prior to the deadline?  Yes  No

- **If yes, please attach photocopies of your federal and state income tax returns with all attachments and W-2 forms for the tax year ending within the 12-month period prior to the deadline. If you did not file an income tax return, indicate reason:** \_\_\_\_\_

(4) Please indicate the amount or percentage of financial support you have provided the student during the 12-month period preceding the deadline for the semester the student is seeking in-state status: \_\_\_\_\_

(5) Motor Vehicle Registration: Do you own or have you owned any vehicle(s) during the 12 months prior to the deadline?  Yes  No If yes, for each owned motor vehicle, please provide the following information (if necessary, attach a supplemental sheet):

Year, Vehicle Make & Model	State of Registration(s) (For the past 12 months)	Date of Vehicle Purchase	Currently Owned? If not, date vehicle sold.

- **Please attach photocopy of the registration(s) and title(s) of all vehicles listed; if sold, a photocopy of the Bill of Sale.**

(6) Motor Vehicle Operator's License:

- a) Do you possess a Maryland driver's license?  Yes  No If yes, date issued: \_\_\_\_\_
- b) Have you possessed a driver's license in any other state?  Yes  No If yes, state? \_\_\_\_\_  
Date issued: \_\_\_\_\_
- c) Has your driver's license been renewed in the last 12 months?  Yes  No
- **Please attach a photocopy of any driver's license you currently possess.**

(7) Voter Registration

- a) Are you currently registered to vote?  Yes  No If yes, in what state? \_\_\_\_\_
- **Please attach a photocopy of your voter's registration card(s) for the past 12 months.**

(8) Have you received public assistance in the twelve months prior to the deadline from a state other than the State of Maryland or from a city, county or municipal agency other than one in Maryland?  Yes  No

If yes, please indicate source and type of assistance: \_\_\_\_\_

(9) Citizenship Status

- a) Are you a citizen of the United States?  Yes  No (If no, complete b and c, or d or e)  
If yes, please attach satisfactory evidence of U.S. citizenship. (e.g., copy of birth certificate or passport or naturalization certificate. If such forms cannot be photocopied, please bring the original to the Residency Classification Officer for inspection.)

b) Country of Citizenship: \_\_\_\_\_

c) Visa Type: \_\_\_\_\_ Alien Registration Number \_\_\_\_\_  
Date of Issue: \_\_\_\_\_ Expires: \_\_\_\_\_

- **Please attach a photocopy of visa.**

d) Are you a permanent resident? \_\_\_\_\_ Alien Registration Number: \_\_\_\_\_  
Date of Issue: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

- **Please attach a copy of Permanent Resident Card (front and back) that covers the entire twelve (12) month period.**

e) Other (please explain): \_\_\_\_\_

**SECTION 6: INFORMATION PERTAINING TO FULL-TIME MEMBER OF THE ARMED FORCES**

(To be completed by the Petitioner/Student or person upon whom the petitioner is dependent)

Name of person completing this section: \_\_\_\_\_  
Last First Middle

Relationship to petitioner: \_\_\_\_\_

(1) Are you a full-time member of the U.S. Armed Forces or their associated reserves? \_\_\_\_\_

(2) Are you presently stationed in Maryland? \_\_\_\_\_

(3) What is your expected separation date from the U.S. Armed Forces or reserves? \_\_\_\_\_

(4) Are you presently residing in Maryland? \_\_\_\_\_

- **Please attach a copy of your lease, deed, or documentation of base housing.**

(5) Have you established Maryland as your home of residency? \_\_\_\_\_

- **Please attach your most recently filed state income tax return and military document showing Maryland as your home of residency.**
- **All military, please submit a photocopy of your most recent orders and your military I.D.**
- **If student petitioner is claiming dependence, please submit a photocopy of military dependent I.D. card.**

**SECTION 7: AFFIRMATION OF PETITIONER AND PERSON UPON WHOM DEPENDENT**  
(To be completed by the Student and/or person upon whom the student is dependent.)

I hereby swear and affirm that all information provided in this petition is accurate and complete, and that all documents attached hereto are true and unaltered copies of the original documents requested. I understand that failure to include all requested documents will render this petition invalid.

I agree to notify the University System of Maryland of enrollment in writing within fifteen (15) days of any change of circumstances that may alter my eligibility for in-state status.

\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Date

\_\_\_\_\_  
**NOTARIZED** signature of person upon whom dependent.  
(Petition will not be accepted without notarized signature.)

\_\_\_\_\_  
Date

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Signature of Notary Public

My commission expires: \_\_\_\_\_  
Date

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**Attachments:** Please be advised the Residency Classification Office will be unable to accept your petition for in-state status if photocopies of the following documents are not provided **with** your petition. Petitions not having the required documentation will be returned to the sender.