INSTRUCTIONS FOR COMPLETING A PETITION FOR CHANGE IN CLASSIFICATION FOR TUITION PURPOSES

Please ***carefully*** read the VIII-2.70 POLICY ON STUDENT CLASSIFICATION FOR ADMISSION AND TUITION PURPOSES of the University System of Maryland, which contains residency requirements, procedures and appeal information. The full text of the policy is available at www.usmd.edu/regents/bylaws/SectionVIII/viii270r.pdf.

I affirm that I have read the policy and requirements for establishing in-state status as well as the information provided below.

Student Signature: _____ **Date:** _____

EagleLinks ID Number: _____

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

Coppin State University
Residency Appeals Committee, Office of Enrollment Management
2500 W. North Avenue
Baltimore, Maryland 21216

IMPORTANT INFORMATION REGARDING PETITIONS:

- **The petition submission deadline is the l**
- Read the petition carefully and complete ALL sections of the petition that apply to you. Failure to complete all applicable sections of the petition and submit ALL required documentation may result in a denial of in-state status.
- 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.
- Only one petition may be filed per semester.
- Requests for retroactive changes are not accepted.
- 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 non-resident tuition as well as all late fees and finance charges accrued during the entire process.
- If claiming dependence, the person upon whom the student is dependent must have his/her signature notarized.
- 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 for instructions.
- Please note: Graduate Assistants who were admitted as out-of-state students are assessed tuition at the in-state rate, **only** as a benefit of their employment. All out-of-state graduate assistants who have met all residency requirements and wish to change their status to in-state must file a timely petition with the Residency Reclassification Services in accordance with policy requirements.

Section 1: Student Information
This section must be completed by the student who is petitioning for in-state status.

Section 2: Basis for claiming In-State Status
This section must also be completed by the student who is petitioning for in-state status.

Section 3: Income Information for Student
This section must be completed by all students who indicated either A or B in Section 2. The evidence should document any Maryland employment and earnings history through sources beyond those incident to enrollment as a student in an educational institution, i.e., beyond support provided by work study, scholarships, grants, stipends, aid, student loans, etc. The student must list all employers for the past two (2) years, with specific dates of employment.

Section 4: Student Residency Information
The Student must complete Section 4. Please make sure to attach photocopies of all requested documents. The student must complete this section even if claiming financial dependence upon another resident of the State of Maryland.

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

A student who is financially dependent on another person must have that person complete Section 5. Please make sure to attach photocopies of all requested documents.

Section 6: Information Pertaining to Full-Time Active Duty Members of the Armed Forces of the United States or Members of the Maryland National Guard

Please review the residency policy before completing this section.

Section 7: Rebuttal Evidence

This section must be completed by each student who checks box "A" in Section 2. Satisfying the requirements listed in paragraphs A through I of Section II of the policy does not rebut the presumption that a Student is in Maryland primarily to attend an educational institution. To overcome the presumption, a student must present additional evidence.

To determine a student's intent, the University will evaluate evidence of that student's objectively verifiable conduct. Evidence that does not document a period of at least twelve (12) consecutive months immediately prior to and including the last date available to register for courses in the semester/term for which the student is seeking in-state tuition status is generally considered an unfavorable factor under this policy. Evidence of intent must be clear and convincing and will be evaluated not only by the amount presented but also based upon the reliability, authenticity, credibility, and relevance of the evidence. The absence of objective, relevant evidence is generally considered an unfavorable factor. A student's statement of intent to remain in Maryland in the future is generally not considered to be objective evidence under the classification policy.

In addition to financial evidence documenting a student's independent status, or dependence upon a Maryland resident, other evidence that may be considered includes, but is not limited to, substantial participation as a member of a professional, social, community, civic, political, athletic, or religious organization in Maryland, including professionally related school activities that demonstrate a commitment to the student's community or to the State of Maryland; registration as a Maryland resident with the Selective Service, if male; evidence showing the student uses his or her Maryland address as his or her sole address of record for all purposes including on health and auto insurance records, bank accounts, tax records, loan and scholarship records, school records, military records, leases, etc.; and an affidavit from a person unrelated to the student that provides objective, relevant evidence of a student's conduct demonstrating the student's intent to live permanently in Maryland.

Section 8: Affirmation of Student and, if Dependence is claimed, 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.

Coppin State University

PETITION FOR CHANGE IN CLASSIFICATION FOR TUITION

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 first day of the term 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. **Please provide documentation where appropriate/required.**

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

Program (please check one): ☐ Undergraduate ☐ Graduate

1) Are you currently registered? ☐Yes ☐No

2) Semester & Year Admitted: _____

3) Current Class Status: ☐ Freshman ☐Sophomore ☐ Junior ☐ Senior ☐ Graduate

4) Name: _____
Last First MI

University ID Number: _____

Address: _____
Street

_____
City State Zip

Date of Birth (mm/dd/yy): _____

Home Telephone: _____

Daytime/Cell Telephone: _____

Email: _____

5) Semester/Year of Petition: _____

6) Have you filed a residency petition before? ☐ Yes ☐ No
If Yes, indicate semester and year: _____

7) Are you financially dependent upon another person (i.e. person who has claimed you on their most recent tax return)? o Yes o No

a) If Yes, name of person upon whom you are financially dependent (i.e. person who has claimed you on their most recent tax return)?
_____

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) θ I am seeking in-state status because I am a permanent Maryland resident.
Complete sections 3, 4, 7, and 8. In addition, if you answered yes to question (7)(a) in Section 1 above, the person upon whom the student is financially dependent must complete section 5.

B) θ 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 8 and provide verification of employment. If you are a spouse or financially dependent child of an employee, provide documentation of your relationship to the employee i.e., marriage certificate, birth certificate, or court order of adoption, and, a copy of the most recent state income tax return.

C) θ 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 OR I am a member of the Maryland National Guard. **Complete Sections 6 and 8 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 of your relationship to that member of the Armed Forces, 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 the student is financially dependent.**

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

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

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

PLEASE ATTACH DOCUMENTATION OF ALL SOURCES OF INCOME FOR THE PREVIOUS 12 MONTHS INCLUDING MOST RECENT PAY STUBS SHOWING YEAR-TO-DATE EARNED INCOME TOTALS FOR EACH EMPLOYER, AND A COPY OF THE STUDENTS' MOST RECENT FEDERAL AND STATE INCOME TAX RETURNS.

SECTION 4: STUDENT RESIDENCY INFORMATION (To be completed by the Petitioner/Student)

(1) Did you move to Maryland primarily to attend an educational institution? ☐ Yes ☐ No. **If yes, proceed directly to Section 8. Please attach a statement regarding the circumstances that brought you to the state of Maryland.**

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

Name of High School: _____

Address: _____
Street City State Zip

If you enrolled in another educational institution(s) since high school, please complete the following:

Name of Institution: _____

Address: _____
Street City State Zip

Were you assessed In-State _____ or Out-of-State _____ tuition and fees while enrolled?

(3) Did you own or rent and occupy living quarters in Maryland during the entire 12-month period prior to the deadline for submitting this petition? ☐ 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) or 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, furniture and pets) in the State of Maryland? ☐ Yes ☐ No
If no, please attach explanation.

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

Income Tax Returns	Year(s) Filed
State [indicate state(s)]: _____	_____

Please attach photocopies of all your completed, signed and filed 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 a Maryland state income tax return for that tax year, please attach an explanation. If you filed state income tax returns in more than one state, please attach all returns and an explanation.

*** For Maryland Income Tax returns, please attach Maryland Comptroller's certified copies of each Maryland tax return. (To obtain certified copies, complete Maryland Comptroller's Office Form 129.)**

(6) Motor Vehicle Registration: Do you own or have you owned any vehicle(s) during the 12 months prior to the deadline? O Yes O 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 a 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.**

(4) Do you receive any public assistance from a state or local agency other than one in Maryland? ☐ Yes ☐ No

If yes, please indicate source and type of assistance: _____

(5) 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 Office 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 of the U.S.? ☐ Yes ☐ No Alien Registration Number: _____

Date of Issue: _____ Date of Expiration: _____

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 student is financially dependent.)

(1) Did you own or rent and occupy living quarters in Maryland for the 12 months prior to the deadline? O Yes O 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 classification 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, furniture and pets) in the State of Maryland? ☐ Yes ☐ No

If no, please attach explanation.

(3) Will you claim or have you claimed as a dependent the student seeking in-state status on your state income tax returns for the tax year(s) during the12-month period prior to the classification deadline? ☐ Yes ☐ No

If yes, please attach: a) photocopies of all your completed, signed and filed 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 and a most recent pay-stub showing year-to-date earned income totals for each employer.

*** For Maryland Income Tax returns, please attach Maryland Comptroller's certified copies of each Maryland tax return. (To obtain certified copies, complete Maryland Comptroller's Office Form 129.)**

If you did not file a Maryland income tax return, indicate reason:

_____

_____

SECTION 6: INFORMATION PERTAINING TO FULL-TIME MEMBER OF THE U.S. ARMED FORCES OR MEMBER OF THE MARYLAND NATIONAL GUARD

Full-Time Member of the U.S. Armed Forces or Member of the Maryland National Guard:
(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 student: _____

- **Full time active duty member of the U.S. Armed Forces: please submit a photocopy of your most recent orders and a photocopy of your military I.D (front and back).**
- **Dependent petitioner: If you are a student claiming dependence upon a full time active duty member of the U.S. Armed Forces, please submit a photocopy of your military dependent's I.D. card (front and back)**

(1) Are you a full-time active duty member of the U.S. Armed Forces? ☐ Yes ☐ No

(2) Are you presently stationed in Maryland? ☐ Yes ☐ No
What is your expected separation date from the U.S. Armed Forces? _____

(3) Are you presently residing in Maryland? ☐ Yes ☐ No
Please attach a copy of your lease, deed, or documentation of base housing.

(4) Have you established Maryland as your home of residency? ☐ Yes ☐ No
Please attach a certified copy of your most recently filed state income tax return and military document showing Maryland as your home of residency.

Maryland National Guard Member
Name of person completing this section: _____
Last First Middle

Please submit documentation confirming that you are a current member of the Maryland National Guard
(i.e. a photocopy of your most recent Maryland National Guard orders or a signed letter, on letterhead, from your commanding officer verifying your status with the Maryland National Guard).

SECTION 7: REBUTTAL EVIDENCE

(To be completed by the Petitioner/Student). Please complete all applicable information. Failure to do so indicates that you have chosen not to offer any rebuttal evidence.

(1) Please list below all professional, social, community, civic, political, athletic, or religious organizations in Maryland, including professionally related school activities that demonstrate a commitment to your community or to the State of Maryland. Please attach a signed statement on letterhead showing the activity and applicable dates.

Activity	Start Date	End Date

(2) Please attach evidence of your sole address of record for all purposes (including on health and auto insurance records, bank accounts, tax records, loan, and scholarship records, school records, military records, leases, etc.).

(3) Please attach notarized affidavit(s) from a person(s) unrelated to you that provides objective, relevant evidence of your conduct demonstrating your intent to live permanently in Maryland.

SECTION 8: AFFIRMATION OF PETITIONER AND PERSON UPON WHOM DEPENDENT (To be completed by the Student and/or person upon whom the student is financially 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. If false or misleading information is submitted the University may, at its discretion, revoke in-state status and take disciplinary action, including suspension or expulsion. I agree to notify the University System of Maryland institution 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 Date

(Petition will not be accepted without notarized signature.)

Sworn to and subscribed before me this _____ day of _____ _____

_____ My commission expires: _____

Signature of Notary Public Date

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