



Office of the Registrar, James Hall—First Floor  
Office of Undergraduate Admissions, James Hall—First Floor  
The Graduate School, James Hall—Second Floor

Applicants filing for in-state tuition reclassification.  
APPLICATION FILING PROCESS  
*Updated 05/2011*

***The deadline for filing the request for in-state tuition is  
5:00 P.M. on the first day of class for each semester.***

The following documentation does not guarantee a residency change, but may strengthen your case for in-state residency. If you choose to submit any or all of the following, please attach copies of this document with personal account information blacked out to the “Application for Classification as a Legal Resident (Domiciliary) of North Carolina for Tuition Purposes.” You will have five working days from the submission of this document to submit any additional materials listed below. If you choose **NOT** to supply any of this information, you cannot do so after submission and review of the “Application for Classification as a Legal Resident (Domiciliary) of North Carolina for Tuition Purposes.”

1. Documents of residence for the past 12 months (i.e., lease/notarized statement from landlord).
2. Copy of Federal and State tax returns for the previous year. Include copy of parent’s tax return if you are under the age of 24.
3. Year-to-date cumulative wage earnings statements from all jobs held for the current year and/or for the past 12 months.
4. Evidence you are a registered voter in North Carolina.
5. Evidence of motor vehicle ownership - registration card in North Carolina.
6. Copy of North Carolina Driver’s License.
7. Evidence of employment and/or means of financial support (i.e., student loans, scholarships, etc).
8. Evidence of membership in community professional associations, unions, churches, or other organizations.
9. Evidence that you filed personal property or real property returns.
10. If you are a minor, your parents or legal guardian must produce evidence of their domicile (legal place of residence). Legal guardians must provide a copy of court-appointed legal guardianship.

If you are an alien, you must provide a copy of your residence status document issued by the U.S. Citizenship and Immigration Services.

**You MUST complete all sections of and provide all information requested on the application.**



**UNIVERSITY OF NORTH CAROLINA WILMINGTON  
REQUEST FOR RECLASSIFICATION AS A LEGAL RESIDENT  
IN NORTH CAROLINA FOR TUITION PURPOSES**



This application and all supporting documentation is due by 5:00 P.M. on the first day of classes, as listed in the [academic calendar](#), for the term in which residency classification is sought.

**PLEASE RETURN TO:**

**Prospective Undergraduate Student**

Office of Admissions  
UNC Wilmington  
601 South College Road  
Wilmington, NC 28403-5904  
[undergradresidency@uncw.edu](mailto:undergradresidency@uncw.edu)

**Current Undergraduate Student**

Registrar's Office  
UNC Wilmington  
601 South College Road  
Wilmington, NC 28403-5618  
[registrar@uncw.edu](mailto:registrar@uncw.edu)

**Current/Prospective Graduate Student**

Graduate School  
UNC Wilmington  
601 South College Road  
Wilmington, NC 28403-5955  
[gradresidency@uncw.edu](mailto:gradresidency@uncw.edu)

Under North Carolina law, a person may qualify as an in-state resident for tuition purposes, thus being eligible for a tuition rate lower than that for nonresidents. Copies of the applicable law and implementing regulations are available for inspection at the Reserve Desk in Randall Library and may be examined upon request. The controlling North Carolina statute (G.S.116-143.1) requires that, "To qualify as a resident for tuition purposes, a person must have established legal residence (domicile) in North Carolina and maintained that legal residence for at least 12 months immediately prior to being classified as a resident for tuition purposes." It also sets forth statutory definitions, rules, and provisions for determining resident status for tuition purposes. Certain non-U.S. citizens may also qualify for resident tuition status.

**You may review the residence manual for statutory and related regulatory conditions online at:**  
[http://uncw.edu/admissions/documents/NCResidenceManual\\_Aug2010.pdf](http://uncw.edu/admissions/documents/NCResidenceManual_Aug2010.pdf)

**DIRECTIONS**

1. **ANSWER ALL QUESTIONS; INCOMPLETE FORMS CANNOT BE SUBMITTED.** If any question is not applicable to your situation, type "Not Applicable" or "N/A."
2. **TYPE ALL RESPONSES.** If you need more space to answer, type "see attached" in the space provided, and use separate additional sheets, numbering your responses the same as the corresponding question and send these sheets with this application form. (electronic or fax)
3. **BE COMPLETELY ACCURATE** to the best of your knowledge and understanding. Knowing falsification of your responses may subject you to disciplinary action including dismissal from the institution. When "date" is requested, give month, day, and year.
4. **SIGN AND DATE** this application where indicated to make those acknowledgements and certifications necessary to render this a viable application.
5. **ATTACH APPROPRIATE DOCUMENTS** to facilitate the timely processing of your request.

**\*\*\* Note to MAC users – please use Adobe Reader, not Preview, to fill out and save this document.**

<b>FOR OFFICE USE ONLY</b>
STATUS: _____
TERM _____
DATE OF MEETING _____

**APPLICANT INFORMATION**  
Type all responses

1. Student's full name \_\_\_\_\_ E-mail \_\_\_\_\_  
 2. Student ID number (if applicable) \_\_\_\_\_ Citizenship \_\_\_\_\_

(If you are not a US citizen, attach completed [Supplemental Form](#)).

3. Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

4. Current mailing address \_\_\_\_\_  
 Until \_\_\_\_\_ Home phone # \_\_\_\_\_ Mobile phone # \_\_\_\_\_

5. Permanent home address \_\_\_\_\_  
 Lived at that address **From**(date) \_\_\_\_\_ **To**(date) \_\_\_\_\_ Phone# \_\_\_\_\_

6. Last previous home address **in** N.C. \_\_\_\_\_  
**From** (date) \_\_\_\_\_ **To** (date) \_\_\_\_\_

Last previous home address **outside** N.C. \_\_\_\_\_  
**From** (date) \_\_\_\_\_ **To** (date) \_\_\_\_\_

7. Are you currently enrolled in UNCW? \_\_\_\_\_ What is your major/program of study? \_\_\_\_\_

Please check: Graduate \_\_\_\_\_ Undergraduate \_\_\_\_\_

Check term and indicate the year for which you want this decision to apply:

a) \_\_\_\_\_ Year \_\_\_\_\_

8. List **ALL** post-secondary schools (universities, colleges, junior colleges, community colleges, etc.) you have attended, in sequence (including UNCW):

Institution	Address (place & state)	From (Date)	To (Date)
a) _____	_____	_____	_____
b) _____	_____	_____	_____
c) _____	_____	_____	_____

**If married**, also list all of the above educational information for your spouse:

Institution	Address (place & state)	From (Date)	To (Date)
a) _____	_____	_____	_____
b) _____	_____	_____	_____

9. If you ever have applied for a determination of your resident status for tuition purposes to any public college or university, provide the following information for **EACH**:

a) Name of college(s) or university(ies)	(b) Resident / Non-Resident	(c) Term/Year
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

d) Has your residence status ever been determined by the UNCW Residence Status Committee?

If so, when? \_\_\_\_\_ Classification? \_\_\_\_\_

10. When did you move your home to North Carolina? \_\_\_\_\_

Why did you move your home to North Carolina?

\_\_\_\_\_

11. When and from what state or foreign country did you move your home and legal residence to North Carolina?

Moved from \_\_\_\_\_ On (date) \_\_\_\_\_

12. When do you claim that you began your legal residence (domicile) in North Carolina? \_\_\_\_\_

13. What do you intend to do after receiving your degree? \_\_\_\_\_

14. Your marital status: \_\_\_\_\_ Date \_\_\_\_\_

15. If married, your spouse's name \_\_\_\_\_ Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Permanent home address \_\_\_\_\_ Since (date) \_\_\_\_\_

Last previous permanent home address outside N.C. \_\_\_\_\_

From (date) \_\_\_\_\_ To (date) \_\_\_\_\_

Present legal residence (domicile) is (City & State) \_\_\_\_\_ Since (date) \_\_\_\_\_

Has he/she ever applied to UNCW for residence status for tuition purposes?

If so, how was he/she classified?

16. List in chronological order to date of this application all places you have spent at least 7 consecutive days during the past three years. Your response must include your current address, all other places lived, and vacations.

Place (city and state) Occupation or Place From (date) To (date)

a) \_\_\_\_\_

b) \_\_\_\_\_

c) \_\_\_\_\_

If married, list in chronological order to date of this application all places your spouse has spent at least 7 consecutive days during the past three years. Your response must include spouse's current address, all other places lived, and vacations.

Place (city and state) Occupation or Place From (date) To (date)

a) \_\_\_\_\_

b) \_\_\_\_\_

c) \_\_\_\_\_

17. When and where (state or foreign country) did you do each of the following during the last 24 months? List each time you did each such act. (If not done in the last 24 months, list where and when such acts were done the last time you did them; if never done at all, write "never"):

Where/Month/Day/Year Where/Month/Day/Year

a) Registered to vote \_\_\_\_\_

b) Voted \_\_\_\_\_

c) Called to serve on jury duty \_\_\_\_\_

d) Acquired or renewed driver's license \_\_\_\_\_

e) Acquired ownership of property for use as your principal dwelling \_\_\_\_\_

f) Inclusive dates of such property ownership: From \_\_\_\_\_ To \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

g) Listed personal property for taxation in the county where you live \_\_\_\_\_

h) Filed state income tax return  
Did you file as resident or nonresident? \_\_\_\_\_

i) Had state income tax withheld during the current tax year? State(s) \_\_\_\_\_

Beginning (Month/Day/Year) \_\_\_\_\_

During the previous tax year? State(s) \_\_\_\_\_

Beginning (month/Day/Year) \_\_\_\_\_

j) Registered/licensed a motor vehicle (car, truck, or other requiring license)

Type of vehicle (list all) \_\_\_\_\_ Where registered/licensed \_\_\_\_\_ (Month/Day/Year) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

18. The car(s) or other motor vehicles which you maintain and operate in N.C. are owned by

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Registered/licensed in (State or Foreign Country) \_\_\_\_\_

Insured in the name of \_\_\_\_\_

Address \_\_\_\_\_

19. List the addresses at which you own and maintain personal property (clothing, furniture, cars, boats, checking or savings accounts, stocks, bonds, pets, jewelry, appliances, etc.) and give percentage of value (of total personal property) maintained at each address:

Address % at this Address

a) \_\_\_\_\_

b) \_\_\_\_\_

20. List your employment for wages in the last 24 months:

Job Title Employer Address (place & state) Dates From To Hrs. per week

a) \_\_\_\_\_

b) \_\_\_\_\_

c) \_\_\_\_\_

If married, list your spouse's employment for wages in the last 24 months.

Job Title Employer Address (place & state) Dates From To Hrs. per week

a) \_\_\_\_\_

b) \_\_\_\_\_

c) \_\_\_\_\_

21. Of the total money required to meet your expenses, what percentage came from each of the following sources and what was it used for?

Source	Preceding Calendar Year (Jan-Dec, 20 ____)		Current Calendar Year (Jan.-Dec., 20 ____)	
	% of Total	Used for	% of Total	Used for
Your earnings	_____	_____	_____	_____
Your savings	_____	_____	_____	_____
Parent(s)/Guardian Name(s) _____	_____	_____	_____	_____
Spouse's earnings	_____	_____	_____	_____
Other (Specify): _____	_____	_____	_____	_____
Total	100%		100%	

22. Father living? \_\_\_\_\_ Name \_\_\_\_\_ Occupation \_\_\_\_\_  
 Permanent home address \_\_\_\_\_ Since (date) \_\_\_\_\_

23. Mother living? \_\_\_\_\_ Name \_\_\_\_\_ Occupation \_\_\_\_\_  
 Permanent home address \_\_\_\_\_ Since (date) \_\_\_\_\_

24. Are parents separated or divorced? \_\_\_\_\_

25. Legal guardian? \_\_\_\_\_ Name \_\_\_\_\_ Occupation \_\_\_\_\_  
 Permanent home address \_\_\_\_\_ Since (date) \_\_\_\_\_  
 Court appointed at (place) address \_\_\_\_\_ On (date) \_\_\_\_\_  
 Familial Relationship (if any) \_\_\_\_\_

26. Who (including yourself) last claimed you as an exemption on state and/or Federal income tax returns, for what tax year, and in which state filed?

a) In-state return for \_\_\_\_\_ Tax year, filed in (state) \_\_\_\_\_ On (date) \_\_\_\_\_  
 Name \_\_\_\_\_ Relationship to you \_\_\_\_\_

b) On Federal return for \_\_\_\_\_ Tax year, filed in (state) \_\_\_\_\_ On (date) \_\_\_\_\_  
 Name \_\_\_\_\_ Relationship to you \_\_\_\_\_

c) Does anyone intend to claim you as a dependent on State and/or Federal income tax returns for the current tax year? \_\_\_\_\_ If yes, who? \_\_\_\_\_  
 Relationship to you \_\_\_\_\_ Returns to be filed to what State(s) \_\_\_\_\_

27. a) Are you now in, or a veteran of, active military service or other Federal government employment? \_\_\_\_\_  
 If answer is "yes," give your home address upon entry \_\_\_\_\_  
 Your official "home of record" \_\_\_\_\_  
 Your official home address now \_\_\_\_\_ Date declared \_\_\_\_\_  
 Your home address upon discharge \_\_\_\_\_ Date of discharge \_\_\_\_\_  
 Legal residence you most recently claimed on DD Form 2058 (State of Legal Residence Certificate)  
 \_\_\_\_\_ Date form completed \_\_\_\_\_  
 Place to which you were paid mileage upon discharge \_\_\_\_\_  
 State for which income tax withheld from your salary \_\_\_\_\_ From what date? \_\_\_\_\_

28. If you (1) now live regularly with, (2) have lived with during the immediately preceding 24 months, or (3) continue to maintain close ties with and periodically live with, another person (who is a relative by blood, marriage, or court order or legal guardian of the person), or (4) have been claimed within the immediately preceding 24 months as a dependent for taxation purposes by someone other than yourself, answer the following for each such person. (Answer only for one adult person at each address. **If married, complete for spouse**; if separation occurred within last 24 months, complete for spouse; if divorce occurred within last 24 months, complete for ex-spouse.)

a) Name \_\_\_\_\_ Relationship to you \_\_\_\_\_  
 Permanent home address \_\_\_\_\_ since (date) \_\_\_\_\_  
 Last previous home address \_\_\_\_\_  
 from (date) \_\_\_\_\_ to (date) \_\_\_\_\_  
 Is any such person now in, or a veteran of, active military service or other Federal government employment? \_\_\_\_  
 If answer is "yes," give home address upon entry \_\_\_\_\_  
 Official home address now \_\_\_\_\_ Date declared \_\_\_\_\_  
 Legal residence most recently claimed on DD Form 205 (State of Legal Residence Certificate) \_\_\_\_\_  
 Date that DD Form 2058 completed \_\_\_\_\_  
 Home address upon discharge \_\_\_\_\_  
 Date of discharge \_\_\_\_\_

b) Where (state or foreign country) and when did this person do each of the following during the last 24 months? List each time he or she did each such act. (If not done in the last 24 months, where and when did he or she do these acts last? If *never* done at all, write "never").

	Where/Month/Day/Year,	Where/Month/Day/Year
1) Registered to vote	_____	_____
2) Voted	_____	_____
3) Called to serve on jury duty	_____	_____
4) Acquired or renewed driver's license	_____	_____
5) Acquired ownership of property for use as your principal dwelling	_____	_____
6) Inclusive dates of such property ownership:	From _____ To _____	From _____ To _____
7) Filed state income tax return	_____	_____
Did he/she file as residence or nonresident?	_____	_____
8) Listed personal property for taxation	_____	_____
9) Registered/licensed motor vehicle(s)	_____	_____
10) Claimed you as an exemption on State income tax return for the _____ tax year, filed in (state) _____		on (date) _____
Claimed you as an exemption on Federal income tax return for the _____ tax year, filed in (state) _____		on (date) _____

29. If there are additional circumstances, events, or acts that you feel support your claim to North Carolina legal residence (domicile) for tuition purposes, email and/or attach a description of each, specifying the place of its occurrence to the appropriate department listed on the first page.

**STUDENT ATTESTATIONS:**

Check each box below to indicate that you have read and understand these statements. **Failure to initial by each statement below will result in your application being returned and will delay processing.**

- 1. I have answered all questions. If any question were not applicable to my situation, I have written "N/A." Whenever "date" is requested, I have given month/day/year as accurately as possible. I understand that failure to answer all questions may result in the application being returned to me thus delaying a decision relative to my residence-and-tuition status.
- 2. I have printed legibly or typed all responses. (If necessary, write "see attached" in the space provided and use separate additional sheets, numbering your responses the same as the corresponding question and stapling these sheets to the application form.)
- 3. I have been completely accurate to the best of my knowledge and understanding. Further, I understand that knowing falsification of my responses may subject me to disciplinary action, including dismissal from the institution.
- 4. I have signed and dated this application where indicated. I understand that failure to make the necessary acknowledgements and certifications renders this an invalid application.
- 5. I understand that all applications and all supporting documents must be submitted to the appropriate department by the FIRST DAY OF CLASS for the academic term in which I wish to be considered for a change in residence classification for tuition purposes.

*Type Initials*

\_\_\_\_\_ 6) I have attached copies of all supporting documents (as applicable) as described in the section below. I have not submitted original documents. (DO NOT attach Social Security cards, birth certificates, or passports.)

*Type Initials*

\_\_\_\_\_ 7) I have retained a copy of this application and attachments for my records, and I have redacted (blacked out) Social Security numbers and account information from the materials provided.

*Type Initials*

\_\_\_\_\_ 8) I understand that the submission of materials does not guarantee a classification of in-state residency and that I may be asked for additional materials in support of my claim to the in-state tuition benefit.

*Type Initials*

\_\_\_\_\_ 9) I understand that within 5 working days of submission of this form that the review process will begin. All supporting documentation must be submitted within this time frame.

*Type Initials*

\_\_\_\_\_ 10) I understand that the burden of proof is on me, the applicant, to demonstrate that I qualify for the in-state tuition benefit. Therefore, I have attached domicile information, evidence of my capacity to establish a bona fide domicile in NC, and confirmation of my intent to permanently remain in the state by submitting evidence for myself and/or my parents or guardians including but not limited to copies of ALL documents (as available) in support of my claim to residency for tuition purposes:

I hereby certify that all information I have set forth herein is true to the best of my knowledge, pursuant to my reasonable inquiry where needed.

I hereby acknowledge that the institution may verify the information set forth herein from sources accessible under law to the institution but that the institution may divulge the contents of this application only as permitted under the Family Educational Rights and Privacy Act of 1974 if I am, or have been, in attendance at this institution.

**PLEASE PRINT THIS DOCUMENT AND SIGN BELOW.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_