

ALL REQUIREMENTS MUST BE MET BY THE FIRST DAY OF CLASSES

DEADLINE FOR SUBMISSION OF PETITION

PETITION FOR IN-STATE TUITION CLASSIFICATION

STATE OF NEW MEXICO



FOR THE _____

TERM: 20 _____

FOR OFFICE USE ONLY

Approved Denied Effective: Fall Spring Summer 20 _____

Reviewed by _____ Date _____

Notes _____

Instructions: Please answer all questions using N/A (Not Applicable) for those questions which do not apply to your situation. If you need additional writing space, please attach pages indicating the subject of each attachment. Submit the petition to the appropriate office well in advance of the term for which the request is being made.

PLEASE PRINT OR TYPE

PETITIONER NAME: _____ SSN OR ID #: _____

DATE OF BIRTH: _____ TELEPHONE: _____

List all addresses where you (student) have resided in the last 24 months. Give inclusive month/year for each residence including current residence, the reason you resided at that residence. (For example, parent's home, school, employment, etc.)

Present Address _____	From	To
City _____ State _____ Zip _____ Reason _____	/	/
Previous Address _____	From	To
City _____ State _____ Zip _____ Reason _____	/	/
Previous Address _____	From	To
City _____ State _____ Zip _____ Reason _____	/	/

1. What state do you consider your permanent home?

YES	NO	2. Do you intend to (or have you) establish (ed) New Mexico residency If yes, student must relinquish residency in all other states.
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YES	NO	3. Have you been absent from New Mexico for more than a month in the previous year?
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YES	NO	4. Are you married to a New Mexico resident?
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YES	NO	5. Are you currently enrolled, or have you attended a higher education institution in the last two years? If yes, complete below:
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INSTITUTION

CITY/STATE

Classified as a resident?

FROM	TO		YES	NO
/	/			
/	/			
/	/			

YES	NO	6a. Did you graduate from a New Mexico high school? If yes, please list high school and graduation date: High School: _____ Date: ____/____/____
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YES	NO	6b. Did you attend for at least year?
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7. List all employers addresses and dates of employment in the previous year. Use additional pages if necessary.

EMPLOYER _____ City _____ State _____ FT/PT _____

FROM /	TO /				
FROM /	TO /				

YES	NO	<p>8. Did your parents or legal guardian claim you as a dependent on federal tax returns in the immediate preceding tax year? If yes, who: Parents <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> If you were under the age of 23 in the most recent tax year, a copy of your parents' 1040, 1040A, 1040EZ tax form is required. If parents filed separately, submit a copy of both parents' returns.</p>
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<p>9. If you are less than 19 years of age or answered yes to question 8, please provide the following information: A. Parent/Guardian Name: _____ Address: _____ City/State/Zip: _____ B. If parents' addresses differ, explain: _____</p>	
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YES	NO	<p>10. Are you registered to vote in New Mexico? If so, provide Voter Registration Number: _____ If no, what state are you registered to vote? _____</p>
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YES	NO	<p>11. Did you file a New Mexico income tax return for the previous year? If no, in what state did you file your taxes? _____</p>
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<p>12. Your driver's license number: _____ State: _____ Expires: _____</p>	
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YES	NO	<p>13. Do you have a New Mexico State issued ID card? If yes, ID Number: _____ Expiration Date: _____</p>
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YES	NO	<p>14. Do you own residential property in New Mexico? If yes, location: _____</p>
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YES	NO	<p>15. Do you have utilities in your name? If yes, which: _____</p>
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YES	NO	<p>16. Do you own a motor vehicle? If yes, license number: _____ State: _____</p>
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<p>17. List any other information which may be pertinent to your classification as a New Mexico resident for tuition purposes: _____ _____</p>	
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YES	NO	<p>18. In the previous year, were you participating in the Texas, Arizona or Colorado tuition reciprocity program?</p>
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YES	NO	<p>19. Are you participating in the Western Undergraduate Exchange Program? Are you participating in the Western Graduate Exchange Program ?</p>
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YES	NO	<p>20. Have you been receiving financial assistance from any state other than New Mexico? If yes, complete the following: Name of granting agency: _____ State: _____ Date Received: _____</p>
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YES	NO	<p>21. Have you separated from the U.S. Armed Forces in the previous two years? A. Home of record on original entry papers: _____ B. Home of record on State of Legal Residence Certificate (DD 2058): _____</p>
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YES	NO	<p>22. Are you a citizen of the United States? If no, applicant must complete this section: Country of Citizenship: _____ Date of entry into the United States: _____ Type of Visa: _____ Permanent Resident Alien Registration Number: _____</p>
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I certify that the above is true and correct to the best of my knowledge. I am aware that the Institution may cancel my admission or registration for any false or misleading statement on this petition and assess retroactive tuition and fees.

Petitioner Signature _____ Date _____