



Residency Reclassification Application and Affidavit for Medical Students

In accordance with S1009.21 Florida Statutes, Rules 6A-10.044 and 6A-20.003, Florida Administrative Code, and the Board of Governors Residency Regulation, the College of Medicine is required to adhere to specific procedures in making determinations for residency reclassification for students who were initially classified as non-Florida residents for tuition purposes.

This application and accompanying documentation must be submitted on or before the last day of registration of the academic year (term) for which Florida residency reclassification is sought. Refer to the "M.D. Academic Calendar" for registration deadlines. Please complete the form and provide copies of all documents.

For information about residency for tuition purposes in the state of Florida visit the Cost of Attendance page on the College of Medicine website at www.med.ucf.edu/students/financial/cost.asp. If you need additional information or have questions, e-mail comregistrar@ucf.edu.

STUDENT INFORMATION

Last Name:	First Name:
_____	_____
Personal ID (PID) (required):	Phone Number:
_____	_____
Knights E-mail Address:	@knights.ucf.edu
_____	_____
Term requesting reclassification	Year _____
Have you previously applied for residency reclassification?	Yes Year _____ Term _____ No

DEPENDENT/INDEPENDENT

Dependent: A person for whom 50% or more of his/her cost of enrollment is provided by another, or as defined by the Internal Revenue Service.

Independent: A person who provides more than 50% of their own cost of enrollment, or meets one or more of the following criteria:

- Student is 24 years of age or older by the first day of classes of the term for which residency is sought.
- Student is married.
- Student has children who receive more than half of their support from the student.
- Student is a veteran of or is currently serving in the United States Armed Forces for purposes other than training.
- Both of the student’s parents are deceased or the student is or was (until age 18) a ward of the court.
- Student is in graduate status or working on a mater’s or doctoral degree during the term for which residency is sought.
- Student is classified as independent by the Student Financial Services Office.

I am an independent person, as defined by the criteria listed above, and have maintained legal residence in the state of Florida for at least 12 months.

I am a dependent person. My parent or legal guardian has maintained legal residence in Florida for at least 12 months.

I am married to a person who has maintained legal residence in Florida for at least 12 months. I now have established legal residence and intend to make Florida my permanent home. **(required: copy of marriage certificate)**

CLAIMANT INFORMATION (all fields required)

Claimant’s First Name:	Claimant’s Last Name:
_____	_____

Relationship to student: Student Parent/Legal Guardian Spouse

Address: _____

City: State: Zip Code: _____

Phone Number: Email Address: _____

DATE CLAIMANT BEGAN ESTABLISHING FLORIDA RESIDENCY

Has the claimant resident outside of Florida when not enrolled at UCF? (**required:** if yes, please provide a written explanation) Yes No

CITIZENSHIP

Is the claimant a U.S. Citizen? Yes No If No, indicate claimant visa status: _____

Is the student (if different from claimant) a U.S. Citizen? Yes No If No, Indicate student's visa status: _____

Required: Copies of both sides of alien registration card/eligible visa. Eligible visa categories are AR1, E, G, H-1, H-4, I, K, L, N, O-1, O-3, R, T, NATO, asylees, parolees, or refugees.

EXCEPTIONS TO 12 MONTH PHYSICAL PRESENCE RULE

Under certain specified conditions, claimants are not required to maintain a bona fide domicile in Florida for the requisite 12 months period of order to be classified as Florida residents for tuition purposes. These unique conditions are listed below. Check any that apply and provide the indicated accompanying documentation.

Member of the Armed Florida on active duty, their spouses and/or dependent children, whose home of record is in Florida(required: copy of military orders, DD 2058, or LES statements)

Full-time instructional or administrative employee of a Florida public school, community college, or institution of higher education, or their spouse or dependent children (required: copy of employment verification)

Full-time employee of a state agency whose fees are paid for by the state for the purposes of job-related law enforcement or corrections training (required: copy of employment verification)

DOCUMENTATION

The following documents are required for every claimant and should reflect ties to Florida for at least 12 months. If your current issue date is less than 12 months prior to the first day of classes then a copy of the previous issued document should be provided in addition to the current one. A copy must be included with any checked items to be considered as proof of Florida residency.

Driver's License (**required:** copy of license)

Current Income Taxes Filed (required if claimant as a dependent copy of 1040)

Vehicle Registration (**required:** copy of registration)

Employment (**required:** proof of employment-paycheck stubs covering at least the 12 months prior to the first day of classes, OR a letter from HR dept.

Full-time (30hrs+/week) OR Part-time (29hrs or less week)

Position Title: _____

Company Name: _____

Start Date: _____ End Date: (or until present): _____

GA, GTA AND GRA positions are considered incident to your enrollment at UCF, and do not qualify as employment for the purposes of Florida residency for tuition purposes.

To be classified as a Florida resident for tuition purposes, the claimant must demonstrate that they have maintained a bona fide domicile for the full 12 months preceding the first day of class of the term for which residency is desired. *University dormitories, fraternities, sororities, scholarship houses, and other UCF campus addresses are not considered permanent addresses for residency purposes.* The documentation must also show that the claimant has established a permanent relationship with Florida for the same 12 month period and has severed all ties to another state or country. UCF reserves the right to ask for any additional or specific documents that may be needed to verify a claimant residency.

Apartment Lease (**required:** copy of lease)

Purchase of home (**required:** copy of deed/mortgage and copy of Homestead Exemption)

Notarized Letter of Residence (**required:** copy of letter)
Residence in someone else's home does not constitute a permanent residence

The following documents are optional but may support a claim of residency. A copy must be included with any checked item to be considered as proof of Florida residency.

Voter's Registration	Florida Professional/Occupational License	Declaration of Domicile
Florida Incorporation	Membership in Florida Organizations	Utility Bill

CLAIMANT SIGNATURE

I am the claimant and I have met all requirements for classification as a Florida resident for tuition purposes. I understand that a false statement in this affidavit will subject me to penalties for making a false statement pursuant to 837.06, Florida Statutes, and that a false statement can subject me to penalties for making a false or fraudulent statement pursuant to BOE Rule 6C-6.01(6) F.A.C.

Claimant Signature

Date:

Student Signature (if different from claimant):

Date:
