



FALL RECLASSIFICATION REQUEST FOR CONTINUING STUDENTS

If you have moved to California with the intent of making this state your permanent home, you have severed all ties with your former state and/or country for at least one year, and are financially independent you may be eligible to be reclassified. Merely living in California for one year is not sufficient evidence. The application review may take up to 3 weeks and you will be notified of a decision via email or postal mail. Please note, you are still responsible to pay all fees by your current due date.

SPRING APPLICATIONS ACCEPTED: April 1st through Census Date

SUBMIT TO: Sacramento State Bursar's Office ([see delivery options on our website](#))

REQUIRED DOCUMENTS:

All items below must be issued on or before **September 20th of the prior year or provided for each month from September 20th of the prior year until current date. Student must be named on all documents submitted.**

1. Reclassification Statement on page 2. Briefly explain your reasons for being in California
2. Completed and signed "CSU Residence Questionnaire" (pages 3-7)
3. Copy of detailed bank statements for each month
4. Most Recent California State Income Tax Return (form 540)
5. AND three (3) of the following documents. One (1) must be from list A, and the remaining documents may be selected from either List A or List B:

List A

- Proof of rent/mortgage receipts for each month, or lease/rental agreement
- Copy of valid California Driver's License or Valid California State Identification Card
- California Voter Registration
- California Vehicle Registration
- Permanent Military Address or Home of Record on Military Records
- Documentation of Public Assistance for each month Payment of nonresident tuition at an out-of-state institution if attended in the past year

List B

- Most recent Federal Income Tax Return (Form 1040)
- Utility bills for each month
- Proof of employment for each month
- Proof of active resident membership in professional organizations
- Proof of California vehicle insurance for each month
- Selective Service Registration Card with California Address if issued in the past year
- Marriage License or Divorce Decree issued in California
- Official transcripts from a California High School
- California Health Insurance Card or MediCAL Card

If you are active military: In addition to the above required documents, please also submit a copy of your Military Leave and Earning Statement (LES) dated September 20th of the prior year.

If you are NOT a United States Citizen: In addition to the above required documents, please also submit a copy of your Alien Registration Card (both sides) AND one of the following:

- Receipt showing date I-485 was filed with Immigration
- I-551 stamp in your passport
- Verification from Immigration showing your current status in the United States (*if you are a student under 19 provide documents for both parent and student*).
- Proof of asylum status (I-589)
- I-94 showing current Visa

RECLASSIFICATION STATEMENT

Please use this space to briefly explain your reasons for being in California.

Name: _____
(First) (Last)

Student ID #: _____

Semester Requested: _____

Contact Phone #: _____

Download the application: www.csus.edu/sfsc (Click on "Forms" in the left menu.)

Sacramento State Bursar's Office

CSU RESIDENCE QUESTIONNAIRE

SUBMIT THE COMPLETED FORM TO THE CAMPUS OFFICE OF ADMISSIONS AND RECORDS

The information requested is deemed relevant and necessary to a proper determination of your residency status for tuition purposes pursuant to the California Education Code Section 68000 et seq. and California Code of Regulations 41900 et seq. Your completed application will help us determine your eligibility. Failure to answer all questions may cause you to be classified as a nonresident. You may submit additional information you believe will establish your California residency. Questions about residency requirements should be referred to a campus residence specialist. For CSU residency requirements, please visit the CSU Residency for Tuition Purpose website, www.calstate.edu/residency.

Instructions: Please complete a separate questionnaire for each campus. Only one term and one campus may be selected per questionnaire and all appropriate fields must be completed or questionnaire will be returned to you unprocessed.
To successfully view and complete this fillable form, download the form and enter all the required information.

Classified as a nonresident for a previous term Yes. Please complete Part A, B, C, D (if applicable), and E (Continuing Student - a student enrolled in a previous term)
 No. Please complete Sections A, B, D (if applicable), and E (Newly admitted students only)

Select only one term: Fall Winter Spring Summer Year _____ Campus _____

PART A: STUDENT INFORMATION

Name _____ StudentID _____
 Last Name First Middle

Phone Number _____ E-mail _____

Birthdate ____/____/____ Birthplace _____
 Month Day Year

Permanent Legal Address _____

City _____ State _____ ZIP _____

Did you attend a California school? Yes No (If yes, you may be exempt from payment of nonresident tuition under AB 540.)

Did you attend an online school offered in another state, but continued to reside in California?

Yes No please list school _____ State _____

Did you attend an out-of-state school? Yes No

Did you pay non-resident fees? Yes No

PART B: RESIDENCE DETERMINATION DATE

The student or parent/legal guardian must be physically in California for more than one year immediately preceding the Residence Determination Date in which enrollment is contemplated.

Check the box that applies to you and provide the requested information:

If you will be 19 years of age or older by the residence determination date, check here and answer 1 through 11 as it applies to you.

If you will be younger than 19 years of age by the residence determination date, check here and answer 1 through 11 as it applies to the natural or adopted parent with whom you most recently resided and whose name and whereabouts you will provide below.

Name _____

Relationship _____

Does your parent/legal guardian currently live in California? Yes No

Foster Youth Please check the box that applies to you and complete Part A (answer 1 through 11 as it applies to you), B, C, D (if applicable) and E.

List the State where you were under the care of the Department of Social Services (e.g. California): _____

CSU offers services through the campus foster youth program. All services are available to students who meet the requirements regardless of age. Programs and services are available for undergraduate and graduate students.

Provide the following information: (a) a copy of a juvenile dependency court document indicating foster care in the child welfare system; or (b) documentation from county social services confirming you were under the care of the Department of Social Services.

Residence Determination Dates

Quarter Calendars

FallSeptember 20
 Winter January 5
 SpringApril 1
 SummerJuly 1

Semester Calendars

FallSeptember 20
 Winter January 5
 (Stanislaus only)
 Spring January 25
 Summer June 1

CalState TEACH

Stage 1September 20 Stage 3 June 1
 Stage 2 January 5 Stage 4September 20

Student Name _____ **Student ID** _____

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QUESTIONS 1 THROUGH 11

First-time applicants under 19 years of age should have their natural or legal guardians answer questions 1 through 11. If you have a special circumstance (e.g., foster youth, parents deceased, unaccompanied minor, married) and you are independent of your parents, answer questions 1 through 11 with your personal information.

1. What state do you regard as your permanent home? _____
2. If California, when did your present stay begin _____/_____/_____
Month Day Year
3. Employed in California in the past year? Yes No
Employer(s) _____ From _____/_____/_____ To _____/_____/_____
Month Day Year Month Day Year
Employer(s) _____ From _____/_____/_____ To _____/_____/_____
Month Day Year Month Day Year
4. Have you ever registered to vote? Yes No (List all states where registered and date of registration)
State _____ Date registered _____/_____/_____ Last Voted _____/_____/_____
Month Day Year Month Day Year
State _____ Date registered _____/_____/_____ Last Voted _____/_____/_____
Month Day Year Month Day Year
5. Do you possess a driver's license and/or ID Card? Yes No (If yes, list state and issue dates)
State _____ Date Issued _____/_____/_____ Previous State _____ Date Issued _____/_____/_____
Month Day Year Month Day Year
6. Current registration of all vehicles owned or operated
State _____ Date Issued _____/_____/_____ State _____ Date Issued _____/_____/_____
Month Day Year Month Day Year
7. Are all personal effects located in California? Yes No If "no," attach explanation on a separate piece of paper.
8. State where last three state income tax returns filed on total income and year covered by each.
State _____ Year _____ State _____ Year _____ State _____ Year _____
9. Address shown on most current W-2 _____

**Please answer the following questions if you currently or previously owned, rented or leased a residence.
Please list all residences during the past three years.**

10. Purchased, leased or rented
Date _____/_____/_____ to Date _____/_____/_____ Location _____
Month Day Year Month Day Year City and State
Date _____/_____/_____ to Date _____/_____/_____ Location _____
Month Day Year Month Day Year City and State
Date _____/_____/_____ to Date _____/_____/_____ Location _____
Month Day Year Month Day Year City and State
11. Active California Bank(s) Name _____ Opened _____/_____/_____
Month Day Year
_____ Opened _____/_____/_____
Month Day Year

Please note, do not include bank account numbers.

If you provide the campus with copies of your bank statements or copies of your tax returns, for your security, do not include the bank account number(s) or Social Security Number(s).

PART C: IS ONLY FOR RECLASSIFICATION OF CURRENT STUDENTS WHO HAVE BEEN CLASSIFIED AS A NONRESIDENT IN A PREVIOUS TERM

Respond to all questions. If a question does not apply to you, use "n/a" to indicate that it is not applicable.

I have been classified as a nonresident in a previous term and I am requesting reclassification. Yes No

Has there been a change in your citizenship, permanent residency, visa or other status (e.g., meets AB 540 requirements)? Yes No If yes, please explain in the box below and provide documentation.

Select a box that best applies to you and provide documentation that demonstrates you meet the criteria.

- Dependent on a parent who has California residence for more than one year immediately preceding the residence determination date
- Enrolled in a graduate or post baccalaureate program, regardless of age
- Turned 24 years of age by the residence determination date
- Married or registered domestic partner as of the residence determination date
- Active duty members serving in the U.S. Armed Forces
- Veteran of the U.S. Armed Forces
- Legal dependent other than spouse or registered domestic partner
- Former ward of the court, foster youth or both parents are deceased
- Declared by a court to be an emancipated minor
- Unaccompanied youth who is homeless or at risk of becoming homeless
- I do not meet any of the criteria listed (student must answer questions 1 - 8)

If you did not meet a criteria listed above, please answer all of the following questions (1-8). Failure to provide complete information may result in nonresident classification (Ed Code 68041).

1.

Will your parent(s) claim you as a dependent exemption for state and federal tax purposes for the current calendar year?

Yes No
2.

Were you claimed as an exemption for state and federal tax purposes by your parent(s) in any of the past three calendar years?

Yes No

If yes, please state year(s) _____

Year Year Year Year
3.

Have you received or will you receive more than \$750 in financial assistance from your parent(s) in the current calendar year?

Yes No
4.

Did you receive more than \$750 in financial assistance from your parent(s) during any of the three past calendar years?.....

Yes No

If yes, please state year(s) _____

Year Year Year Year
5.

Have you lived or will you live for more than six weeks with your parent(s) during the current calendar year?.....

Yes No
6.

Did you live for more than six weeks with your parent(s) during any of the three past calendar years?

Yes No

If yes, please state year(s) _____

Year Year Year Year
7.

List all places you have lived prior to your most recent arrival in California, the dates you lived in each place and the parent with whom you resided.
If you need more room, please attach an explanation on a separate sheet of paper.

From _____/_____/_____ To _____/_____/_____ State or Country _____ Parent you resided with _____
Month Day Year Month Day Year

From _____/_____/_____ To _____/_____/_____ State or Country _____ Parent you resided with _____
Month Day Year Month Day Year
8.

Source(s) of financial support during the past year _____

PART D: EXCEPTIONS/EXEMPTIONS Military AB 540 *Other Exemptions/Exceptions _____ (choose applicable exception from www.calstate.edu/residency). If you are not eligible for resident classification, you still may be eligible for an exemption or exception from payment of nonresident tuition. *Other exceptions/exemptions are limited to those listed at www.calstate.edu/residency

Military

Have you ever served in the United States military? Yes No

Are you a dependent (child/spouse) of a person who served in or is currently serving in the U.S. Armed Forces? Yes No

If yes,

Date joined ____/____/____ From which state _____ Date separated from active duty, if any ____/____/____
Month Day Year Month Day Year

What is your home of record? _____

What was your last permanent duty station? _____ From ____/____/____ To ____/____/____
Month Day Year Month Day Year

I served in the U.S. Armed Forces and am eligible to receive educational assistance under either the Montgomery GI Bill® or Post-9/11 GI Bill® educational benefits program. I reside in California.

Provide: (a) a copy of your DD Form 214 (DD214) and (b) a copy of a Certificate of Eligibility from the Department of Veterans Affairs (VA).

I am a dependent of a person who served in the U.S. Armed Forces and am eligible to receive educational assistance under the Post-9/11 GI Bill educational benefits program (Chapter 35). I reside in California.

Provide: Certificate of Eligibility from the VA.

I am a dependent of an active duty service member of the U.S. Armed Forces. I reside in California and have received transferred benefits under the Post-9/11 GI Bill.

Provide: Certificate of Eligibility from the VA.

I am a dependent of a service member of the U.S. Armed Forces who died in the line of duty after September 10, 2001. I reside in California and am eligible to receive veteran's educational assistance.

Provide: Certificate of Eligibility from the VA.

I am a service member or the dependent of a service member of the U.S. Armed Forces who is stationed in California.

Provide: Permanent Change of Station orders or a statement from the service member's commanding officer.

I served in the U.S. Armed Forces on active duty in California for more than one year and am enrolling within two years of discharge from a California military base.

Provide: (a) copy of your DD214; (b) evidence of being station in California upon separation from service; an affidavit to the institution at which you are enrolling stating your intent to establish residency in California as soon as possible.

I currently participate or will participate in the VA's Veterans Readiness and Employment (formerly called Vocational Rehabilitation).

Provide: DD-214 (Certificate of Release or Discharge from Active Duty), and Tungsten Purchase Order.

GI Bill® is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by VA is available at the official U.S government Web site at <https://www.benefits.va.gov/gibill>.

Note: If you currently do not have the necessary documentation to show that you qualify for a military exemption, you will be charged nonresident fees. Once the CSU campus receives and reviews your documentation, fees will be adjusted as appropriate.

