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252-638-7200

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[www.cravenc.edu](http://www.cravenc.edu)

## **North Carolina Public Higher Education**

### **Residence and Tuition Status Application**

Under North Carolina law, a person may qualify as a resident for tuition purposes in North Carolina, thereby being eligible for a tuition rate lower than that for nonresidents for tuition purposes. Copies of the applicable law and of implementing regulations are available on line at [http://www.northcarolina.edu/sites/default/files/documents/state\\_residence\\_classification\\_manual.pdf](http://www.northcarolina.edu/sites/default/files/documents/state_residence_classification_manual.pdf).

In essence, 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 his or her classification as a resident for tuition purposes." G.S. 116-143.1 also sets forth statutory definitions, rules, and special provisions for determining residence status for tuition purposes. These provisions include special rules with respect to persons who are married or who are within identified subclasses of minors. Certain aliens may also qualify for resident tuition status. The residence Manual, located at the above website, should be consulted for the statutory and related regulatory conditions.

## **\* INSTRUCTIONS FOR COMPLETING THE APPLICATION \***

If you are currently not classified as a resident for tuition purposes and want to apply for the in-state tuition benefit, you must file your application in a timely manner. Residence decisions will not be made immediately. **You will be notified of your status within two weeks (10 business days) after submitting the application. Please include current contact information (e-mail and phone number).**

1. Respond to all questions within the part(s) of the form that you are to complete. If a question is not applicable to your situation, write "Not Applicable" or "N/A."
2. Print or type 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 or clipping these sheets to the application form.
3. Be completely accurate to the best of your knowledge and understanding. Knowingly falsifying your responses may subject you to disciplinary action, including dismissal from the institution. When "date" is required, give day, month and year.
4. Sign and date this application where indicated to make those acknowledgments and certifications necessary to render this a viable application.
5. Provide documentation to support your application (examples of documentation attached).

*\*Failure to complete all parts of the form that apply will delay your resident classification.*

## Documentation in Support of Residence Application

In support of your application for a residency status change, please include documented evidence of the following with your **completed** application.

Various combinations of documents may be reviewed as evidence of your status. No one item, nor a particular combination, will necessarily be the determining factor. **The decision will be based on your eligibility to establish residence, your length of residence and the weight of the evidence.**

**Supporting documentation should be presented at the time you submit this application or before the point of registration. Any additional information requested must be submitted by the 10th business day of the term for which you are seeking residency reclassification.**

1. Documentation of residence in North Carolina for the past 12 months (i.e. lease/notarized statement from landlord)
2. Copy of federal and state tax returns for the previous year.
3. Year-to-date cumulative wage earning statements from all jobs held for the current year and/or for the past 12 months.
4. Evidence of voter registration.
5. Evidence of motor vehicle ownership (registration card).
6. Copy of North Carolina driver's license.
7. Evidence of employment and/or other means of financial support (student loans, scholarships, etc.)
8. Evidence that you filed personal property or real property returns in North Carolina.
9. Evidence of membership in community professional associations, unions, churches, or other organizations.
10. If you are a minor, your parents or legal guardian(s) must produce evidence of their domicile (legal place of residence).
11. Copy of your parents' tax returns for the previous year if you are under 24 years of age.
12. If you are a legal alien, we must have a copy of your residence status document issued by the Immigration and naturalization Services.

If documentation is not attached to your application for residency, it will be automatically denied.





Student Services  
 800 College Court  
 New Bern, NC  
 28562  
 252-638-7200

**NORTH CAROLINA  
 RESIDENCE  
 AND TUITION STATUS  
 APPLICATION**

**APPLICANT INFORMATION**

1.	Applicant Student's Full Name					
2.	Social Security Number (voluntary)				Citizenship	
<i>If not a US citizen, attach documentation of legal status in US (Visa, Green Card, etc. If this information is attached, check here. <input type="checkbox"/></i>						
3.	Date of birth:		Place of birth:			
4.	Marital status	<input type="checkbox"/> Single		<input type="checkbox"/> Married	Date	
		<input type="checkbox"/> Divorced	Date	<input type="checkbox"/> Separated	Date	
		<input type="checkbox"/> Legal Separation	Date	<input type="checkbox"/> Widowed	Date	
		<input type="checkbox"/> Marriage Annulled	Date			

**ENROLLMENT INFORMATION**

5.	Are you currently enrolled in this institution?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
	Are you applying for admission	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Circle earliest term and indicate year in which you want this decision to apply:					
Year		<input type="checkbox"/> Fall	<input type="checkbox"/> Spring	<input type="checkbox"/> Summer, First Session	<input type="checkbox"/> Summer, Second Session

**REPORT OF RESIDENCY**

6.	Address while attending Craven Community College (current):				
7.	Permanent home address:				
	Since:		Telephone:		
8.	Previous home address in NC:				
	From:		To:		
9.	Last previous home address outside NC:				
	From:		To:		
10.	Why did you move your home to North Carolina?				
	On what date did you move your home to North Carolina:				
11.	From what state or foreign country did you move your home and legal residence:				
12.	When do you claim your legal residence in NC began?				
13.	Has your residence status for tuition purposes been previously determined by a North Carolina public educational institution? <i>(If Yes, complete below)</i>		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	a) Name of Institution:				

	b) Classification:	<input type="checkbox"/> Resident		<input type="checkbox"/> Nonresident	
	c) Last term and year you were so classified:	Term		Year	
14.	List in chronological order to date of this application all places you have spent at least seven (7) consecutive days during the past three years. Your response must include your current address, all other places lived, and vacations.				
	<b>Place (city and state)</b>	<b>Occupation or Purpose</b>		<b>From (date)</b>	<b>To (date)</b>
	a)				
	b)				
	c)				
15.	When and where (state or foreign country) did you do each of the following during the last 24 months? List <i>each</i> 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 <i>never done at all</i> , write “never”:				
		<b>Where/Month/Day/Year</b>	<b>Where/Month/Day/Year</b>	<b>Where/Month/Day/Year</b>	
	a) Register 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:		From:	
		To:		To:	
	g) Filed state intangibles tax return				
	h) Listed personal property for taxation in the county where you live				
	i) Filed state income tax return.				
	Did you file as a resident or nonresident?				
	j) Had state income tax withheld during the current tax year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	State(s)	
	Beginning (Month/Day/Year)				
	During the previous year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	State(s)	
	Beginning (Month/Day/Year)				
	Was all of the amount withheld refunded to you?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
	k) Registered/licensed a motor vehicle (car, truck, or other requiring license)				
	<b>Type of vehicle (list all)</b>	<b>Where registered/licensed</b>		<b>Month/Day/Year</b>	
16.	The car(s) or other motor vehicles which you maintain and operate in NC are owned by:				
	Name:		Address:		

	Registered/licensed in (state or foreign country):		
	Insured in the name of:		Address:
17.	List the addresses at which you own or 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)		

### SCHOOLS ATTENDED

18.	Secondary (high or preparatory) schools you attended in sequence:			
	<b>Name</b>	<b>Address (city &amp; state)</b>	<b>From (date)</b>	<b>To (date)</b>
	a)			
	b)			
19.	List <b>ALL</b> post-secondary schools (universities, colleges, junior colleges, community colleges, etc.) you have attended, in sequence ( <i>including</i> this institution):			
	<b>Name</b>	<b>Address (city &amp; state)</b>	<b>From (date)</b>	<b>To (date)</b>
	a)			
	b)			

### EMPLOYMENT DATA

20.	List your employment for the last 24 months:					
	<b>Job Title</b>	<b>Employer</b>	<b>Address (city &amp; state)</b>	<b>From (date)</b>	<b>To (date)</b>	<b>Hrs per wk</b>
	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?					
		<b>Preceding Calendar Year-- Jan-Dec ( )</b>		<b>Current Calendar Year - Jan-Dec ( )</b>		
	<b>Source</b>	<b>% of Total</b>	<b>Used For</b>	<b>% of Total</b>	<b>Used For</b>	
	Your earnings					
	Your savings					
	Parent(s) or Guardian					
	Name of above	Address				
	Other (specify):					
	<b>Total</b>					
22.	a) Have you been in active military service within the past two years?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	

	If so, <b>ATTACH</b> copies of the “Leave and Earnings Statements” for the most recent pay period and for the pay period 12 months ago.		
	b) If you have been in the active military service or other federal government employment within the past two years, answer the follow:		
	Home address upon entry:		
	Official “home” of record:		
	Official home address now		
	Date this home address was declared		
	Home address upon discharge		
	Date of discharge		
	Legal residence most recently claimed on DD Form 2058 (State of Legal Residence Certificate)		
	Date that DD Form 2058 was completed		
	Place to which mileage was paid upon discharge		
	State for which income tax was withheld		
	From what date?		
26.	Answer the questions below for each of the following individuals:		
	<ul style="list-style-type: none"> <li>Your parents (or legal guardian) if you now live with them or have lived with them in the past 24 months <b>OR</b> if they have claimed you as a dependent for tax purposes in the past 24 months. Answer this question for your <i>father</i> unless your parents are separated or divorced. If your parents are separated or divorced, answer this question for both parents.</li> <li>Your spouse.</li> </ul>		
	a) Name(s):		Relationship to you:
	Permanent home address:		
	Lived at this address since (date):		
	Last previous home address:		
	From (date)	To (date)	
	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 <i>never</i> done at <i>all</i> , write “never”):		
		<b>Where/Month/Day/Year</b>	<b>Where/Month/Day/Year</b>
	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		
		From:	From:



	6) Inclusive dates of such property ownership:	To:		To:		To:	
	7) Filed state intangibles tax return						
	8) Listed personal property for taxation						
	9) Filed state income tax return						
	Did you file as a resident or nonresident?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	10) Registered/licensed motor vehicle(s)						
	11) Claimed you as an exemption on State Income Tax return for:	tax year		Filed in (state)		On (date)	
	Federal Income Tax return for:	tax year		Filed in (state)		On (date)	
24.	If there are additional circumstances, events, or acts that you feel support your claim to North Carolina legal residence (domicile) for tuition purposes, attach a description of each, specifying the place and date of its occurrence; or you may enter the information below.						

- I hereby acknowledge that completion of Item 2 (Social Security number) is voluntary, is requested by the institution solely for administrative convenience and record-keeping accuracy, and is requested only to provide a personal identifier for the internal records of this institution.
- 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.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent or guardian  
(if applicant is under 18 years of age)

\_\_\_\_\_  
Date

<b>This area to be completed only designated college representative.</b>		<b>Decision:</b>	<input type="checkbox"/> In-State	<input type="checkbox"/> Out-of-State
_____ Signature of College Representative		_____ Review/Effective Date		
Comments: <i>(enter below)</i>				

