



# OHIO UNIVERSITY Residency Petition

## Important Instructions - Please Read

Complete this **Residency Petition** only if you are seeking Ohio Residency under C2 or E1 of the **Ohio Board of Regents Residency Requirements 3333-1-10 Ohio Student Residency for State Subsidy and Tuition Surcharge Purposes.**

**Incomplete petitions will not be processed.** Signed and notarized petitions must be submitted with requested documentation to the appropriate office indicated on the back of this document. This petition must be approved prior to the last day of registration of the term for which you are petitioning.

**Note: Even if you would have qualified for Ohio residency for an earlier term, residency decisions are never retroactive.**

Please Print

### 1 Identification

Name \_\_\_\_\_  
Last First Middle/Maiden

OU PID or SSN \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_

Marital Status:  Single  Married \_\_\_\_/\_\_\_\_/\_\_\_\_

### 2 Requesting Residency For

Fall  Winter  Spring  Summer Semester 20\_\_\_\_

### 3 Student Status

Currently Enrolled?  Yes  No

New Student?  Yes  No

Returning Student?  Yes  No

College/Department of Enrollment \_\_\_\_\_

- Undergraduate
  - Full-time (11 or more hours)
  - Part-time (10 or fewer hours)

- Graduate/Medical
  - Full-time (9 or more hours)
  - Part-time (8 or fewer hours)

Campus

- Athens  Chillicothe  Eastern
- Lancaster  Southern  Zanesville

### 4 Local Information

Home Telephone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Work Telephone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Present Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

### 5 Permanent Home Address

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

### 6 Citizenship

Are you a citizen of the United States?  Yes  No

If you are not a citizen of the United States, what type of visa do you hold?

- Permanent \_\_\_\_\_
- Student \_\_\_\_\_
- Other (explain) \_\_\_\_\_

Attach documentation

### 7 Resident For All Other Legal Purposes

In what state are you registered to vote? \_\_\_\_\_

Have you registered or voted outside Ohio within the past 12 months?  Yes  No

Attach documentation

Do you have a driver license?  Yes  No

Is it from Ohio?  Yes  No

Do you own a car?  Yes  No

Is it currently registered in Ohio?  Yes  No

Attach documentation

### 8 Place You Lived the Immediate Past Summer

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Working?  Yes  No Where \_\_\_\_\_

### 9 Residences

In careful chronological order (listing present address first) indicate where you have lived since completion of high school, or for the past five years, whichever is shorter.

Attach documentation showing you have lived in Ohio for the previous 12 consecutive months (i.e. apartment lease, canceled rent checks, rent receipts, landlord's statement).

Use additional paper if needed.

1. Since \_\_\_\_/\_\_\_\_/\_\_\_\_ to present \_\_\_\_/\_\_\_\_/\_\_\_\_  
City State

If student:

Full-time  Part-time  Paid Nonresident Fee

If employed:  Full-time  Part-time

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

2. Since \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_  
City State

If student:

Full-time  Part-time  Paid Nonresident Fee

If employed:  Full-time  Part-time

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

3. Since \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_  
City State

If student:

Full-time  Part-time  Paid Nonresident Fee

If employed:  Full-time  Part-time

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

**10 Ohio Income Tax**

Have you filed an Ohio personal income tax statement within the previous 12 months?  Yes \_\_\_\_\_  No \_\_\_\_\_  
year

**Attach documentation**

If not entirely self-supporting, who claimed you as an exemption on the past year's federal income tax return?

\_\_\_\_\_ name \_\_\_\_\_ relationship

**Attach documentation**

**11 Source of Support**

Explain completely your sources of money received during the previous 12 months (from employment, savings, loans, G.I. Bill, Social Security benefits, spouse, etc.) and **fully document your sources** (copies of contracts or awards, check stubs containing your name, statement from payroll officials, W-2 forms, etc.) Use additional paper as needed.

You must show income that can reasonably be considered adequate as self-sustaining. If you are a student during the 12 months being reviewed, you must show income that includes the cost of tuition, room and board, books and supplies and daily living expenses.

**Source 1** \_\_\_\_\_  
type of support  
 Since \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 State \_\_\_\_ Amount in past 12 months \$ \_\_\_\_\_

**Source 2** \_\_\_\_\_  
type of support  
 Since \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 State \_\_\_\_ Amount in past 12 months \$ \_\_\_\_\_

**Source 3** \_\_\_\_\_  
type of support  
 Since \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 State \_\_\_\_ Amount in past 12 months \$ \_\_\_\_\_

**Source 4** \_\_\_\_\_  
type of support  
 Since \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 State \_\_\_\_ Amount in past 12 months \$ \_\_\_\_\_

**Attach documentation**

CATEGORY	FALL Term 20 ____	SPRING Term 20 ____	SUMMER Term 20 ____	20 ____ ANNUAL TOTAL
<b>INCOME:</b>				
From Jobs				
From Parents				
From Student Loans				
From Scholarships				
From Financial Aid				
Other _____				
Other _____				
<b>INCOME TOTAL</b>				
<b>EXPENSES:</b>				
<input type="checkbox"/> <b>LIVING ON CAMPUS</b>				
Room				
Board				
<input type="checkbox"/> <b>LIVING OFF CAMPUS</b>				
Rent				
<b>Utilities</b>				
Electric				
Gas				
Water				
Telephone				
Cable				
<b>Food</b>				
Groceries				
<b>COMMON EXPENSES</b>				
Eating Out/Vending				
<b>Automobile</b>				
Payment				
Insurance				
Gasoline / Oil / etc.				
<b>School</b>				
Tuition				
Books/Supplies				
School Fees				
<b>Computer Expenses</b>				
<b>Entertainment</b>				
Other _____				
Other _____				
Other _____				
<b>EXPENSES TOTAL</b>				
<b>NET INCOME</b> (Income less expenses)				

**Do not sign this Residency Petition until you are directed to do so by a Notary Public.**

**Oath**

I declare that the foregoing statements are true, correct and complete. I understand that falsified information can result in financial obligation (non-resident fees) to, and dismissal from this institution. I also understand that information from my application for admission and other University records can be considered a part of this petition.

\_\_\_\_\_ being duly sworn, deposes and says that the  
Print Name forgoing statements are true, correct and complete. Affix Notary Seal Here

Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_ My commission expires \_\_\_\_ / \_\_\_\_ / \_\_\_\_ state of \_\_\_\_\_, county of \_\_\_\_\_  
Signature of Notary Public