

DRIVER LICENSE AND VEHICLE INFORMATION

Do you have a driver's license? Yes No If yes, in what state? _____
 Do you own a car? Yes No If yes, in what state is your car registered? _____ **attach copy**

VOTER REGISTRATION INFORMATION (not required by non-US citizens including permanent residents)

Are you a registered voter? Yes No If yes, in what state are you registered? _____
 Registration Date _____/_____/_____ **attach copy**
 In what state did you (or your spouse) file resident taxes last year? _____
 Where will you file for this year? _____ **attach copy of most recent signed federal and state income tax return**

SECTION B (must be completed if you are claiming independent status)

If you are financially dependent on your parents, please proceed to Section C. Individuals under the age of 22 are generally not eligible for independent status. Students must provide evidence of one year of independent living in order to be considered emancipated.

Did you or will you live in an apartment, house or building owned or leased by your parents for more than six (6) weeks during last year? Yes No previous year? Yes No

Do you rent or own? _____ rent _____ own **attach copy of signed lease, deed or tax bill**

Were you or will you be claimed as a dependent on your parents' federal or state income tax return for: last year? Yes No previous year? Yes No

Amount of financial support provided to you by parents or guardian during: last year \$ _____ previous year \$ _____

Are you an emancipated minor or adult student who is financially independent from parental support? Yes No

If yes, when did you become independent? _____/_____/_____ month year

List below your sources of financial support for the last two (2) years:

From (month/year):	To (month/year):	Name and address of employer	hours/week

If not employed, please list your financial resources:

APPLICANT'S AFFIRMATION

The following statement must be completed and notarized before a Notary Public. Notaries are available in Student Accounts, Financial Aid, Registrar and Business Affairs departments.

STATE OF _____

COUNTY OF _____

I, _____, the applicant herein, being duly sworn, do hereby affirm that I am a bona fide legal resident domiciled in the State of New York, and that all the information provided on this form and any attachments thereto, is accurate, complete and true to the best of my knowledge. I understand that providing false information knowingly will disqualify me from consideration for New York status.

Signature of Applicant _____

Sworn to before me this _____ day of _____, 200__. (Notary Public)

SECTION C

To be completed by the parent or the custodial parent with whom the student lives or who will be claimed as your dependent for income tax purposes.

Name _____ Relationship _____

Permanent Address _____

Length of time at this address _____ Telephone Number () _____ - _____

Previous address _____

Citizenship _____ USA _____ Other _____ If other, list visa type _____

Please list states in which you filed or will file resident taxes during:

current year _____ last year _____ previous year _____

Attach copy of most recent signed federal and state income tax return

Do you have a driver's license? _____ Yes _____ No _____ If yes, in what state? _____

Do you own a car? _____ Yes _____ No _____ If yes, in what state is it registered? _____

AFFIRMATION

The following statement must be completed and notarized before a Notary Public. Notaries are available in Student Accounts, Financial Aid, Registrar and Business Affairs departments.

I hereby certify that the above applicant is applying with my knowledge for New York State residency status at SUNY Plattsburgh.

STATE OF _____

COUNTY OF _____

I, _____, do hereby affirm that all the information provided on this form and any attachments thereto, is accurate, complete and true to the best of my knowledge.

Signature of parent/guardian _____

Sworn to before me this _____ day of _____, 200__. (Notary Public)