



APPLICATION FOR CHANGE IN CLASSIFICATION FOR TUITION

Office of Records and Registration
1200 North Dupont Highway
Dover, DE 19901
302-857-6375 (P) 302-857-6379 (F)

Change in Classification for Tuition

Students are responsible for registering under the proper tuition classification. In general, classification of in-state status for tuition purposes requires an individual to have established domicile in the State of Delaware for at least 12 consecutive months immediately prior to the beginning of the term for which he or she is applying. For all military personnel, Delaware State University will comply with section 702 of the Veterans Access, Choice and Accountability Act of 2014 (Choice Act). **Note: Only United States citizens and eligible non-citizens (lawfully admitted permanent residents) are currently eligible. Any student enrolled as an international student does NOT meet eligibility for in-state tuition.** The place of domicile of an independent student is the legal domicile of the student. The place of domicile of a dependent student is the legal domicile of the student's parent(s) or legal guardian(s). Whether a student is considered independent or dependent is determined on the basis of the federal government's definition of independent student.

Students who are in any one of the following categories are considered Independent:

- Is 24 years of age or older
- Is enrolled in a graduate –level program of study
- Is married
- Has children or dependents who receive more than half of support from them
- Is an orphan
- Is or was a ward of the court until age 18

Independent students will have to provide documentation proving their independent status

All other students are considered Dependent.

The checklist provided below is designed as a guide only. You may be asked for some, all or additional information. Supplying all documents requested in no way guarantees approval of the petition. For purposes of clarification, you may be contacted for more information. All application documents must be submitted along with a completed application. **Incomplete applications will be denied.**

- Complete, signed classification for tuition application
- A filed Delaware resident income tax return*
- A federal tax return showing Delaware as the state of domicile of the applicant or the person on whom the classification depends*
- Birth Certificate
- Proof of ownership of or leasehold interest in a bona fide permanent home in Delaware that is occupied as the primary residence of the applicant
- Delaware vehicle registration for all owned and/or leased vehicles
- Evidence showing that the applicant uses his or her Delaware address as the sole address of record for all purposes, including health and automobile insurance records, bank accounts, tax records, loan and scholarship records, school records, military records, etc. Evidence must take the form of copies of a minimum of twelve consecutive months of bills or statements.
- Photocopy of voter registration card of petitioner for the past twelve months
- Photocopy of visa, permanent residence card or other immigration documents for petitioners who are not U.S. citizens
- Consecutive monthly utility/cable bills
- Pay Stub
- DD214
- Military Orders
- Military ID card (Sponsor and dependent, if applicable).
- Certificate of Eligibility

*For yearly income amounting to less than \$5,500.00, verification of employment must be documented and reviewed.



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DIRECTIONS: THIS FORM IS INTENDED FOR USE BY THOSE WHO SEEK A CHANGE IN TUITION CLASSIFICATION, OR THOSE WHO'S STATUS CANNOT BE DETERMINED FROM THE USUAL INFORMATION SUBMITTED WITH THE APPLICATION FOR ADMISSION TO THE UNIVERSITY. ALL APPLICANTS MUST COMPLETE SECTION I (IDENTIFYING INFORMATION) AND SECTION VII (AFFIRMATION). STUDENTS WHO ARE FINANCIALLY DEPENDENT SHOULD HAVE SECTION II COMPLETED BY THE PERSON (PARENT, OR LEGAL GUARDIAN) WHO CONTRIBUTES TO THEIR SUPPORT. STUDENTS WHO ARE FINANCIALLY INDEPENDENT SHOULD COMPLETE SECTION III. IN ADDITION, MILITARY PERSONNEL ON WHOM RESIDENCY WILL BE BASED SHOULD COMPLETE SECTION IV. NON-U.S. CITIZENS ON WHOM RESIDENCY WILL BE BASED MUST ALSO COMPLETE SECTION V.

SECTION I. IDENTIFYING INFORMATION

Student Name:		Semester Applying For:
Date of birth:	ID#:	Phone:
DSU E-mail Address:		
Current address:		
City:	State:	ZIP Code:
		From:
		To:
Previous address:		
City:	State:	ZIP Code:
Lived at this address From:		To:

***NOTE: CHANGES IN STUDENT STATUS SHALL NOT BE MADE RETROACTIVE TO ANY SEMESTER PRIOR TO THE ONE IN WHICH REQUEST FOR CHANGE IN CLASSIFICATION IS MADE**

SECTION II. CLAIM OF RESIDENCY DERIVED FROM PARENT, SPOUSE OR LEGAL GUARDIAN (Section to be completed by parent, spouse or legal guardian on whom student is financially dependent.)

Name:	Relationship to Student	
If legal guardian, name of court in which Guardianship or custodianship was granted:	Date:	
Current address:		
City:	State:	ZIP Code:
Lived at this address From:		To:
Previous address:		
City:	State:	ZIP Code:
Lived at this address From:		To:
Place of Employment:		
Address:		
City:	State:	ZIP Code:
Worked at this address From:		To:
Last tax year for which you filed a Delaware resident personal income tax return (attach copy of last Delaware tax return filed):		
Will you file a Delaware resident return for the current year? Yes No		
State in which you are registered to vote (attach photocopy):		



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State in which your motor vehicle is registered (attach photocopy):

State in which your driver's license is issued(attach photocopy):

Do you provide half or more of the total support for the student? **Yes No**

Do you claim this student as a dependent on federal and state income tax? **Yes No**

If **yes**, when did you first claim student?

If **No**, when did you last claim student?

Do you claim this student as a dependent on federal and state income tax? **Yes No**

If **yes**, when did you first claim student?

If **No**, when did you last claim student?

If guardian, does parent contribute to support of student? **Yes No**

If **yes**, to what extent?

If parents are divorced or legally separated, dose other parent contribute to support of student? **Yes No**

If **Yes**, to what extent?

If parents are divorced or legally separated, with whom does the student live? (Name, Address)

SECTION III. CLAIM OF RESIDENCY BASED ON FINANCIAL INDEPENDENCE

(To be completed by the student claiming financial independence)

Address of parent/guardian

Does your parent/guardian claim you as a dependent for federal or state income tax purposes? **Yes No**

If **No**, last **tax year** such claim was made?

Indicate sources of income on which claim of financial independence is based (e.g. personal savings, scholarship, grant, loan, spouse)

Source	Percentage of Total Expenses Supported by this Source
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Was the income of your parent or guardian considered in the determination of need for any financial aid (grant or educational lean from any source) which you currently receive? **Yes No**

Date on which you became financially independent (month, day, year):

Date on which you established a permanent residence separate from that of your parent or guardian (month, day, year):

Location (City, State, Zip Code):

Date on which you established a domicile in Delaware (month, day, year):

Location (city, State, Zip Code):

Have you resided continuously in Delaware since that time? **Yes No**

If **No**, when did you terminate Delaware residence (month, day, year):

Location to which you moved (City, State):



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When did you re-establish Delaware residence? (month, day, year)

Current location in Delaware (Street, City, Zip Code)

Your address one year ago (Street, City, State, Zip Code)

List your places of employment for past 18 months

Firm	City and State	Dates of Employment
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State in which you are registered to vote (attach photocopy):

State in which your driver's license is issued (attach photocopy)?

State in which your motor vehicle is registered (attach photocopy)?

Latest **tax year** for which you filed a Delaware **resident** personal income tax return (attach copy of last Delaware tax return filed):

Will you file a Delaware **resident** tax return for the current year? **Yes No**

Is your primary reason for living in the state of Delaware, to attend the University? **Yes No**
Explain:

Do you have tentative employment in Delaware following your graduation? **Yes No**

*If **Yes**, where?

***NOTE: Please provide written verification from employer.**

SECTION IV. MILITARY PERSONNEL

(To be completed by military students eligible for and receiving Veteran Affairs Educational Benefits. This includes active duty members and their spouses/dependents; veterans and their spouses/dependents; and National Guard and Reserve members assigned to a Delaware unit)

Please check applicable categories:

Active Duty ___ Veteran___ Spouse___ Dependent___ Guard/Reserve

Post 9/11(CH33)___ MGIB(CH30)___ National Guard/Selective Reserves(CH1606)___ or (CH1607)___

Dependent Education Assistance(CH35)___Post 9/11 Fry Scholarship(CH33)_____

Required Documentation : Photocopy of active duty/reserve /dependent ID card, front and back; active duty and reserve/guard orders; dependent's birth certificate; marriage certificate; Veterans Affairs Certificate of Eligibility; Discharge from Active Duty(DD Form 214); and enrollment schedule and account summary for current semester

Have you filed a financial aid application? **Yes No**



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SECTION V. NON-U.S. CITIZENS

(In addition to the appropriate Section II or III, this section is to be completed by the person on whom residency will be based if they are not a U.S. citizen, i.e., parent, spouse, legal guardian, or student if financially independent.) Non-U.S. citizens must show that they have certain visa or immigration statuses in order to have the legal ability to maintain a domicile in Delaware. Upon meeting these requirements, applicants will be subjected to the same considerations as U.S. citizens in determining residence classification for tuition purposes.

Visa type:	Visa Registration Number
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Has I-485 been filed? **Yes No**

Do you have I-551 status? **Yes No**

If permanent resident, date on which status was granted (month, day, year):

(Please submit photocopy of front and back of Permanent Resident Card)

List address listed with Immigration Office (Street, City, State, Zip Code)

I am a permanent resident in the state of

SECTION VI. SPECIAL CONDITION OR CIRCUMSTANCES

In the space below please describe any conditions or circumstances which you feel have relevance to your tuition classification. You may include additional information (tax documents, leases, deed employment verification as necessary).

SECTION VII. AFFIRMATION (To be completed in all cases)

I (We) affirm that the above information is accurate and complete and recognize that incorrect and/or incomplete information given for the purpose of misleading University Officials may result in dismissal from the University and retroactive claim for out-of-state tuition.

Signature of Student

Signature of Parent or Legal Guardian who
completed section II

Date

Date