

# RESIDENCY DECLARATION

APPLICANT NAME: \_\_\_\_\_ SSN: \_\_\_\_\_  
Print Legal Last Name First Name Full Middle Name

SECTION A - I claim legal residency in the State (or country) of: \_\_\_\_\_ Since: \_\_\_\_\_

- YES NO Check the appropriate box
- I have been present in Hawai'i continuously for the last 13 months
  - I have filed a Hawai'i Individual Tax Return as a Resident for the last two years
  - I registered to vote in the state of Hawai'i. If no, what state: \_\_\_\_\_
  - I voted in the last election in the state of Hawai'i
  - My parent(s) / legal guardian(s) claimed me on their Personal Income Tax. State: \_\_\_\_\_

If you are less than 18 and unmarried, please answer the following questions based on your parent or legal guardian:

My parent/legal guardian:

- Claims legal residency in the state of Hawai'i
- Has been present in Hawai'i continuously for the last 13 months
- Has filed a Hawai'i Individual Tax Return as a resident for the last two years
- Is registered to vote in the state of Hawai'i
- Voted in the last election in the state of Hawai'i
- Is a US citizen
- If not a US citizen, has been a permanent resident for more than one year (attach copy of green card)

Relationship to applicant: \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If your legal guardian is court appointed, submit a copy of the court order with this application.

## Section B - College Enrollment

This past year, I enrolled in a publicly supported college or university outside the state of Hawai'i.  YES  NO (if no, skip to section C)

I paid the following tuition at that institution:  Resident  Nonresident  Resident due to nonresident exemption based on: \_\_\_\_\_

## Section C - Exemptions from the Nonresident Tuition, leave blank if it does not apply.

- I am a full-time faculty or staff member of the University of Hawai'i, or a spouse or legal dependent of such person (attach employment contract)
- I am Hawaiian and a resident of another state (attach an official copy of your birth certificate, and if necessary, that of your parents/grandparents documenting Hawaiian ancestry)
- I am a citizen of \_\_\_\_\_ which has no public institution of higher education ranking baccalaureate degrees
- I am a member or authorized dependent of a member of the US armed forces, on active duty, stationed in Hawai'i (complete verification below)
- I am a member of the Hawai'i National Guard or Hawai'i-based Reserves (complete verification below)

### VERIFICATION OF U.S. ARMED FORCES - attach Military Orders

Permission is hereby granted to release information to UH Campus:

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

Military Member's Signature: \_\_\_\_\_

Member's Relationship to Applicant:

Self  Spouse

Parent  Other (specify)

To be completed by the Member's Commanding Officer:

\_\_\_\_\_  
Name, Rank, & Branch of Service of member of the U.S. Armed Forces on active duty stationed in Hawai'i, or member of the Hawai'i National Guard of Hawai'i-based Reserves

Estimated Date (mm/dd/yyyy): \_\_\_\_\_  
Rotation from Hawai'i or separation from military service, whichever is earlier (do not use "Indefinite" or leave blank)

\_\_\_\_\_  
Signature of Commanding Officer Date

\_\_\_\_\_  
Rank and Branch of Service in Hawai'i

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Phone Number of Branch of Service in Hawai'i