



CALIFORNIA STATE UNIVERSITY, DOMINGUEZ HILLS

## OFFICE OF ADMISSIONS & RECRUITMENT

1000 East Victoria Street • Carson, CA 90747  
(310) 243-3645

### Residence Questionnaire Checklist

Name: \_\_\_\_\_

Date: \_\_\_\_\_

CSUDH ID #: \_\_\_\_\_

Term of Consideration: \_\_\_\_\_

This form and instructions are for applicants **who have not yet attended the University**, and are requesting to change/correct reported residency information that may affect their CSU tuition. This also applies to returning students who have lost continuing student status and are now reapplying for admission or returning students who are seeking a new degree and are now reapplying for admission. This form is to be used to assist in the process of collecting the required documentation needed to submit your residency request packet. Please follow the checklist below to assure you're submitting a complete packet.

**\*\*Please check off all items you are submitting with the packet. \*\***

<u>Semester</u>	<u>Residence Determination Date</u>
<i>Fall Semester</i>	<b>September 20<sup>th</sup></b>
<i>Spring Semester</i>	<b>January 25<sup>th</sup></b>
<i>Summer Semester</i>	<b>June 1<sup>st</sup></b>

- Complete Residence Questionnaire form, must complete Sections A, B, D (if applicable), and E.
- A minimum of **THREE DOCUMENTS** is required. At least one document must be from list A, and the remaining documents may be selected from either List A or List B.

Options to meet the requirement:

**Option 1:** One document from list A and two documents from List B

**Option 2:** Two documents from list A and one document from List B

**Option 3:** All three documents from list A

(for example, CA driver's license, CA vehicle registration and CA Voter Registration card)

#### List A:

- California State Income Tax Return (most recent tax year, all pages)
- Ownership of residential property as a primary residence in California (must meet RDD)
- Continuous occupancy of rented or leased property in California (must meet RDD)
- Obtaining a California Driver's License or Identification Card (must meet RDD)
- Registering To Vote and Voting history (must meet RDD)
- Registering a Motor Vehicle Operated in California (must meet RDD)
- Permanent Military Address or Home of Record on Military Records (must meet RDD)
- Receipt of California state services (e.g., unemployment, disability, CalFresh) (must meet RDD)
- Payment of nonresident tuition at an out-of-state institution if attended within the past year

#### List B:

- Federal Income Tax Return with a California address (most recent tax year, all pages)
- Utility bill (e.g., cell phone, gas, electrical) with same California address (must meet RDD, and only one utility bill will be accepted)
- Maintaining Active Resident Memberships in Professional Organizations (e.g., police union, teacher's union) (must meet RDD)
- Maintaining an Active Bank Account with a California address (must meet RDD)
- Employment in California (e.g., verification of employment, W-2, pay stubs) (must meet RDD)
- Vehicle insurance with a California address (student must be listed in the policy) (must meet RDD)
- Selective Service Registration with a California address
- Court documents (e.g., ward of the court, divorce decree, or child support)

***\*Actions and/or documents that show residential ties to a State or country other than California may result in a denial of residency.***

- If you are a citizen of another country, you must additionally submit paperwork on your current immigration status such as:
  - Copy of Green Card (front and back)
  - Visa or Employment Card (front and back)
- Once all documents have been collected, please submit your **complete packet** to the Residency Questionnaire Dropbox by clicking on the following link: [Residency Questionnaire Dropbox](#)

**Complete packets must be submitted for review no later than the Residence Determination Deadline.**

# CSU RESIDENCE QUESTIONNAIRE

**SUBMIT THE COMPLETED FORM TO THE CAMPUS OFFICE OF ADMISSIONS AND RECORDS**

The information requested is deemed relevant and necessary to a proper determination of your residency status for tuition purposes pursuant to the California Education Code Section 68000 et seq. and California Code of Regulations 41900 et seq. Your completed application will help us determine your eligibility. Failure to answer all questions may cause you to be classified as a nonresident. You may submit additional information you believe will establish your California residency. Questions about residency requirements should be referred to a campus residence specialist. For CSU residency requirements, please visit the CSU Residency for Tuition Purpose website, [www.calstate.edu/residency](http://www.calstate.edu/residency).

**Instructions:** Please complete a separate questionnaire for each campus. Only one term and one campus may be selected per questionnaire and all appropriate fields must be completed or questionnaire will be returned to you unprocessed.  
**To successfully view and complete this fillable form, download the form and enter all the required information.**

**Classified as a nonresident for a previous term**  Yes. Please complete Part A, B, C, D (if applicable), and E (Continuing Student - a student enrolled in a previous term)  No. Please complete Sections A, B, D (if applicable), and E (Newly admitted students only)

**Term:** Fall  Winter  Spring  Summer  Year \_\_\_\_\_ Campus \_\_\_\_\_

**PART A: STUDENT INFORMATION**

Name \_\_\_\_\_ StudentID \_\_\_\_\_  
 Last Name First Middle

Phone Number \_\_\_\_\_ E-mail \_\_\_\_\_

Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Birthplace \_\_\_\_\_  
 Month Day Year

**Permanent Legal Address** \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Did you attend a California school? Yes  No  (If yes, you may be exempt from payment of nonresident tuition under AB 540.)

Did you attend an online school offered in another state, but continued to reside in California?

Yes  No  please list school \_\_\_\_\_ State \_\_\_\_\_

Did you attend an out-of-state school? Yes  No

Did you pay non-resident fees? Yes  No

**PART B: RESIDENCE DETERMINATION DATE**

Check the box that applies to you and provide the requested information

**If you will be 19 years of age or older** by the residence determination date, check here and answer 1 through 11 as it applies to you.

**If you will be younger than 19 years of age** by the residence determination date, check here and answer 1 through 11 as it applies to the natural or adopted parent with whom you most recently resided and whose name and whereabouts you will provide below.

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Does your parent/legal guardian currently live in California? Yes  No

**Foster Youth** Please check the box that applies to you and complete Part A (answer 1 through 11 as it applies to you), B, C, D (if applicable) and E.

List the State where you were under the care of the Department of Social Services (e.g. California): \_\_\_\_\_

I have been in the foster care for at least 12 consecutive months after reaching the age of 10.

I am in a current foster care out-of-home placement order by a juvenile dependency court.

I was still in a foster care out-of-home placement, ordered by the juvenile dependency court when I reached my 18th birthday.

Provide the following information: (a) a copy of a juvenile dependency court document indicating foster care in the child welfare system; or (b) documentation from county social services confirming you were under the care of the Department of Social Services.

**Residence Determination Dates**

Quarter Calendars		Semester Calendars	
Fall .....	September 20	Fall .....	September 20
Winter .....	January 5	Winter .....	January 5
Spring .....	April 1	(Stanislaus only)	
Summer .....	July 1	Spring .....	January 25
		Summer .....	June 1

**CalState TEACH**

Stage 1 .....	September 20	Stage 3 .....	June 1
Stage 2 .....	January 5	Stage 4 .....	September 20

**QUESTIONS 1 THROUGH 11**

First-time applicants under 19 years of age should have their natural or legal guardians answer questions 1 through 11. If you have a special circumstance (e.g., foster youth, parents deceased, unaccompanied minor, married) and you are independent of your parents, answer questions 1 through 11 with your personal information.

1. What state do you regard as your permanent home? \_\_\_\_\_
2. If California, when did your present stay begin \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year
3. Employed in California in the past year? Yes  No   
Employer(s) \_\_\_\_\_ From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year Month Day Year  
Employer(s) \_\_\_\_\_ From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year Month Day Year
4. Have you ever registered to vote? Yes  No  (List all states where registered and date of registration)  
State \_\_\_\_\_ Date registered \_\_\_\_/\_\_\_\_/\_\_\_\_ Last Voted \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year Month Day Year  
State \_\_\_\_\_ Date registered \_\_\_\_/\_\_\_\_/\_\_\_\_ Last Voted \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year Month Day Year
5. Do you possess a driver's license and/or ID Card? Yes  No  (If yes, list state and issue dates)  
State \_\_\_\_\_ Date Issued \_\_\_\_/\_\_\_\_/\_\_\_\_ Previous State \_\_\_\_\_ Date Issued \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year Month Day Year
6. Current registration of all vehicles owned or operated  
State \_\_\_\_\_ Date Issued \_\_\_\_/\_\_\_\_/\_\_\_\_ State \_\_\_\_\_ Date Issued \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year Month Day Year
7. Are all personal effects located in California? Yes  No  If "no," attach explanation on a separate piece of paper.
8. State where last three state income tax returns filed on total income and year covered by each.  
State \_\_\_\_\_ Year \_\_\_\_\_ State \_\_\_\_\_ Year \_\_\_\_\_ State \_\_\_\_\_ Year \_\_\_\_\_
9. Address shown on most current W-2 \_\_\_\_\_

**Please answer the following questions if you currently or previously owned, rented or leased a residence. Please list all residences during the past three years.**

10. Purchased, leased or rented  
Date \_\_\_\_/\_\_\_\_/\_\_\_\_ to Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Location \_\_\_\_\_  
Month Day Year Month Day Year City and State  
Date \_\_\_\_/\_\_\_\_/\_\_\_\_ to Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Location \_\_\_\_\_  
Month Day Year Month Day Year City and State  
Date \_\_\_\_/\_\_\_\_/\_\_\_\_ to Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Location \_\_\_\_\_  
Month Day Year Month Day Year City and State
11. Active California Bank(s) Name \_\_\_\_\_ Opened \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year  
\_\_\_\_\_ Opened \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

*Please note, do not include bank account numbers.*

*If you provide the campus with copies of your bank statements or copies of your tax returns, for your security, do not include the bank account number(s) or Social Security Number(s).*

**PART C: IS ONLY FOR RECLASSIFICATION OF CURRENT STUDENTS WHO HAVE BEEN CLASSIFIED AS A NONRESIDENT IN A PREVIOUS TERM**

Respond to all questions. If a question does not apply to you, use "n/a" to indicate that it is not applicable.

I have been classified as a nonresident in a previous term and I am requesting reclassification. Yes  No

Has there been a change in your citizenship, permanent residency, visa or other status (e.g., meets AB 540 requirements)? Yes  No  If yes, please explain in the box below and provide documentation.

Select a box that best applies to you and provide documentation that demonstrates you meet the criteria.

- Dependent on a parent who has California residence for more than one year immediately preceding the residence determination date
- Enrolled in a graduate or post baccalaureate program, regardless of age
- Turned 24 years of age by the residence determination date
- Married or registered domestic partner as of the residence determination date
- Active duty members serving in the U.S. Armed Forces
- Veteran of the U.S. Armed Forces
- Legal dependent other than spouse or registered domestic partner
- Former ward of the court, foster youth or both parents are deceased
- Declared by a court to be an emancipated minor
- Unaccompanied youth who is homeless or at risk of becoming homeless
- I do not meet any of the criteria listed (student must answer questions 1 - 8)

**If you did not meet a criteria listed above, please answer all of the following questions (1-8).** Failure to provide complete information may result in nonresident classification (Ed Code 68041).

1. Will your parent(s) claim you as a dependent exemption for state and federal tax purposes for the current calendar year? .....Yes  No
2. Were you claimed as an exemption for state and federal tax purposes by your parent(s) in any of the past three calendar years? .....Yes  No   
If yes, please state year(s) \_\_\_\_\_  
Year                      Year                      Year                      Year
3. Have you received or will you receive more than \$750 in financial assistance from your parent(s) in the current calendar year? .....Yes  No
4. Did you receive more than \$750 in financial assistance from your parent(s) during any of the three past calendar years? .....Yes  No   
If yes, please state year(s) \_\_\_\_\_  
Year                      Year                      Year                      Year
5. Have you lived or will you live for more than six weeks with your parent(s) during the current calendar year? .....Yes  No
6. Did you live for more than six weeks with your parent(s) during any of the three past calendar years? .....Yes  No   
If yes, please state year(s) \_\_\_\_\_  
Year                      Year                      Year                      Year
7. List all places you have lived prior to your most recent arrival in California, the dates you lived in each place and the parent with whom you resided.  
If you need more room, please attach an explanation on a separate sheet of paper.  
From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_ State or Country \_\_\_\_\_ Parent you resided with \_\_\_\_\_  
Month Day Year      Month Day Year
- From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_ State or Country \_\_\_\_\_ Parent you resided with \_\_\_\_\_  
Month Day Year      Month Day Year
8. Source(s) of financial support during the past year \_\_\_\_\_

**PART D: EXCEPTIONS/EXEMPTIONS** Military  AB 540  \*Other Exemptions/Exceptions  \_\_\_\_\_ (choose applicable exception from [www.calstate.edu/residency](http://www.calstate.edu/residency)). If you are not eligible for resident classification, you still may be eligible for an exemption or exception from payment of nonresident tuition. \*Other exceptions/exemptions are limited to those listed at [www.calstate.edu/residency](http://www.calstate.edu/residency)

**Military**

Have you ever served in the United States military? Yes  No

Are you a dependent (child/spouse) of a person who served in or is currently serving in the U.S. Armed Forces? Yes  No

**If yes,**

Date joined \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ From which state \_\_\_\_\_ Date separated from active duty, if any \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_
   
 Month Day Year Month Day Year

What is your home of record? \_\_\_\_\_

What was your last permanent duty station? \_\_\_\_\_ From \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ To \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_
   
 Month Day Year Month Day Year

I served in the U.S. Armed Forces and am eligible to receive educational assistance under either the Montgomery GI Bill® or Post-9/11 GI Bill® educational benefits program. I reside in California.

**Provide:** (a) a copy of your DD Form 214 (DD214) and (b) a copy of a Certificate of Eligibility from the Department of Veterans Affairs (VA).

I am a dependent of a person who served in the U.S. Armed Forces and am eligible to receive educational assistance under the Post-9/11 GI Bill educational benefits program (Chapter 35). I reside in California.

**Provide:** Certificate of Eligibility from the VA.

I am a dependent of an active duty service member of the U.S. Armed Forces. I reside in California and have received transferred benefits under the Post-9/11 GI Bill.

**Provide:** Certificate of Eligibility from the VA.

I am a dependent of a service member of the U.S. Armed Forces who died in the line of duty after September 10, 2001. I reside in California and am eligible to receive veteran's educational assistance.

**Provide:** Certificate of Eligibility from the VA.

I am a service member or the dependent of a service member of the U.S. Armed Forces who is stationed in California.

**Provide:** Permanent Change of Station orders or a statement from the service member's commanding officer.

I served in the U.S. Armed Forces on active duty in California for more than one year and am enrolling within two years of discharge from a California military base.

**Provide:** (a) copy of your DD214; (b) evidence of being station in California upon separation from service; an affidavit to the institution at which you are enrolling stating your intent to establish residency in California as soon as possible.

I currently participate or will participate in the VA's Veterans Readiness and Employment (formerly called Vocational Rehabilitation).

**Provide:** DD-214 (Certificate of Release or Discharge from Active Duty), and Tungsten Purchase Order.

*GI Bill® is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by VA is available at the official U.S government Web site at <https://www.benefits.va.gov/benefits/>.*

*Note: If you currently do not have the necessary documentation to show that you qualify for a military exemption, you will be charged nonresident fees. Once the CSU campus receives and reviews your documentation, fees will be adjusted as appropriate.*

**Education Code § 68130.5, as amended, commonly known as AB 540**

Certain nonresident students (including U.S. citizens, permanent residents, and undocumented individuals, TPS, DACA) who have attended, graduated, or achieved the equivalent from a California school (elementary school, secondary school, adult education, community college) may be exempted from paying nonresident tuition. Such students must remain classified as “nonresidents” for residency classification and financial aid eligibility purposes.

You must meet the Attendance Requirement and Graduation/Degree requirements (check boxes that apply).

Attendance requirement (must meet one):

- I have 3 years of attendance at a California high school.
- I have 3 or more years of high school coursework and 3 years of attendance in California elementary schools, California secondary schools, or a combination of California elementary and secondary schools.
- I attended or attained credits at a combination of California high school, California adult school, and California Community College for the equivalent of (3) years or more.

Graduation/Degree Requirement (must meet one)

- I have graduated or will graduate (before the first term of enrollment at the CSU) with a California high school diploma or the equivalent (i.e., California-issued GED, CHSPE).
- I completed or will complete (before the first term of enrollment at the CSU) an associate’s degree from a California Community College.
- I completed or will complete (before the first term of enrollment at the CSU) the minimum requirements at a California Community College for transfer to the California State University.

If you checked at least one box in the Attendance and Graduation requirement questions, you may be eligible for California nonresident tuition exemption.

Please complete and submit the [California Nonresident Tuition Exemption Request](#) (commonly known as the affidavit). Please complete a separate form for each campus

Each campus will request additional information (e.g. high school transcripts).

**PART E: CERTIFICATION – to be read and signed by all students completing this form**

The burden of proof is on the student to clearly demonstrate both physical presence and intent to remain indefinitely in California. Students seeking reclassification of nonresident status must also demonstrate financial independence. You are required to present evidence in accordance with the Education Code and Code of Regulations referenced above.

**Certification – To be read and signed by all applicants to certify the accuracy of the information provided.**

I certify under penalty of perjury that the foregoing statements and any other information submitted by me in connection with the determination of my residency are true, complete, and accurate. I understand that my residency determination will be based on the facts stated in this questionnaire and the documents I provide. If I receive classification as a California resident or an exception or exemption, I promise to notify the residence specialist if any of the facts stated in this questionnaire change. I authorize release of any information submitted by me in connection with my application for admission and determination of residency to any person, firm, corporation, association or government, whether federal, state, local, or foreign, but only as necessary to verify or explain the information, to obtain pertinent records, or in connection with perjury proceedings.

Signed at

\_\_\_\_\_ City and County Applicant Signature Date

**FOR CSU CAMPUS USE ONLY**

Form Processed By: \_\_\_\_\_ Date \_\_\_\_\_ Approved  Denied

Notes:  
\_\_\_\_\_