



Immediate Residency Application

REGISTRAR'S OFFICE

University of Cincinnati
PO Box 210060, Cincinnati, OH 45221-0060
Telephone: 513-556-9900; Fax: 513-556-8000
E-mail: registrar.info@uc.edu

Under *Ohio Administrative Code* 3333-1-10 (C) (3), a student is eligible for "Immediate Residency" if the student documents that he or she is: "A dependent student of a parent or legal guardian, or the spouse of a person who, as of the first day of a term of enrollment, has accepted full-time, self-sustaining employment and established domicile in the state of Ohio for reasons other than gaining the benefit of favorable tuition rates."

I. Student Applicant's Information

Last Name: _____ First Name: _____

UCID: _____ E-mail Address: _____

Date of Birth: _____ Are you a U.S. citizen? Yes ___ No ___

Current Address: _____

(Number and street)

City State/Country Zip

Term & Year Residency Requested: Autumn: _____ Winter: _____ Spring: _____ Summer:

II. Attach all of the following documents (form will not be reviewed without documents):

- A copy of leases or deeds establishing that both you *and* your spouse/parent(s) are residing in Ohio;
- A letter from your spouse/parent's employer printed on that organization's letterhead stationary affirming your spouse/parent's full-time employment *and* specifying the date that your spouse/parent was transferred or hired;
- A copy of your spouse/parent's pay-check stub showing year-to-date earnings and Ohio tax withholding;
- If you have lived in Ohio for more than thirty (30) days, a copy of **your** Ohio driver's license or State of Ohio state ID card;
- **If you are not a U.S. citizen**, attach a copy of **your** Passport with Visa code **or** attach a copy of your Permanent Resident card;
- **A dependent must also attach** a copy of the 1st page of your parent's most recent Federal Income Tax form establishing that your parent(s) claimed you as a financial dependent;

I acknowledge that a false statement on this application or any documents submitted will subject me to a nullification of the Ohio resident classification and the assessment of out-of-state tuition for current and future enrollments and retroactively to the first term of my enrollment as an Ohio resident for-tuition-purposes.

Signature: _____ Date: _____

Return this form and all supporting documents to the One Stop Student Services Center (University Pavilion 2nd Floor), or mail to:

University of Cincinnati
Office of the Registrar – Attn: J. Paul
PO Box 210060
Cincinnati, Ohio 45221-0060

The residency reclassification application and all supporting documentation **must** be received by the One Stop Student Services Center or the Office of the Registrar **three full weeks prior to the 1st day of classes** of the academic quarter or semester for which you are applying for residency reclassification.