



Ohio Residency Application
Office of the Registrar
PO Box 210060 Cincinnati, OH 45221-0060 Email: resid@ucmail.uc.edu

Application Request Information

Please enter the term, year, and residency classification for which you are applying. Note: Applications are not accepted for past terms. State guidelines prohibit retroactive reclassification decisions.

Term input box

Term

Year

Residency Classification input box

Residency Classification

Student Applicant's Identification Information

First Name

Last Name

UCID input box with 'M' in the first cell

UCID

Email

Date of Birth

Telephone

Are You a US Citizen or Permanent Resident?

Yes

No

If "No", Choose the Option That Applies to You:

Permanent Resident

Visa (select one)

Visa Expiration Date

Other (specify)

Student Applicant's Education Information

Current College

Current Major

Undergraduate

Graduate

Other

Student Applicant's Financial Information

Marital Status

Single

Married:

Dependent Status

Are you claimed as a dependent on your parents'/parent's most recent federal or state tax return?

Yes

No

If "No", what was the last year that one or both parents claimed you?

Parent or Legal Guardian's Name

Street Address

City

State Zip

County

Telephone

Student Applicant's Address Information

Please list your personal residence addresses for the past 24 months.

Current Address			Most Recent Past Address (If Applicable)		
To Present					
From			From	To	
Street Address			Street Address		
City	State	Zip	City	State	Zip
County			County		
Other Past Address #1 (If Applicable)			Other Past Address #2 (If Applicable)		
From	To		From	To	
Street Address			Street Address		
City	State	Zip	City	State	Zip
County			County		

Student Applicant's Ohio License, Vehicle Registration, and Voter Registration

Ohio Driver's License Date of Issue

Ohio Vehicle Registration Date of Issue

Ohio Voter Registration Date of Issue

Student Affirmations and Acceptance of Terms

I understand that if I fail to submit all required supporting documentation, my Ohio Residency Application will be denied.

By my signature, I acknowledge that Ohio residency-for-tuition-purposes is governed by [Ohio Revised Code 3333.31](#) and [Ohio Administrative Code 3333-1-10](#). I also acknowledge that a false statement on this application will subject me to a nullification of the Ohio resident classification, resulting in the assessment of out-of-state tuition for current and future enrollments and retroactively to the first term of my enrollment under the classification of Ohio-resident-for-tuition-purposes.

Student Signature

Date (If Not Signing Digitally)