



University of California, Berkeley

Statement of Legal Residence

Readmitted Students Only

For term beginning: Fall 20____ Spring 20____

Semester last registered: _____

Last paid fees as: Resident Nonresident

FOR DEPUTY'S USE ONLY

Resident Nonresident

By _____

Date _____

Notes:

All students must complete in black or blue ink, sign, and date.

- **Proof of status is required of non-U.S. citizens claiming California residence. Please attach copy/copies of immigration document(s) verifying your immigration status.**

Print name as listed on University records (last, first, middle) _____

--	--	--	--	--	--	--	--	--	--

UCB Student ID No. _____

UG
 G

Birthdate _____

Age _____

Present mailing address: Number, Street, City, State, Zip _____

Telephone No. _____

Permanent residence: Number, Street, City, State, Zip _____

E-mail address _____

Do you claim to be a resident of California? Yes No
 Are you a citizen of the United States? Yes No
 If no, are you a permanent resident of the United States? Yes No
 If yes, please attach a photocopy of your Alien Registration card.
 If no, have you applied for permanent residence status? Yes No
 If yes, do you currently hold a valid immigration visa? Yes No
 Alien registration number _____ Date awarded _____
 Visa type _____ valid from _____ to _____

Motor Vehicle:

Do you have a driver's license? Yes No
 If yes, in which state _____
 Date issued _____
 Last renewed _____
 If a non-driver, do you have a state identification card? Yes No
 If yes, in which state _____
 Date issued _____
 Do you have/own a motor vehicle? Yes No
 If yes, date of registration _____
 State of registration _____

Dates of Physical Presence in California: Continuously since birth
 From _____ To _____ From _____ To _____

- **If you claim California residence but have been absent from the state for more than six weeks during the last 12 months, please attach a statement explaining your absence.**

Did you attend high school in California for at least 3 years and graduate from a California high school? Yes No
 Are you a veteran of the U.S. armed forces? Yes No
 Are you a ward of the court? Yes No
 Do you have legal dependents other than a spouse? Yes No
If you are under 24 and you answered "yes" to any of these questions, please provide documentation.

Voter Registration:

Are you registered to vote? Yes No
 State of registration _____
 Date of registration _____
 Have you voted within the last 15 months? Yes No
 If yes, in which state _____ date _____

Financial Information:

	2016 Calendar Year	2015 Calendar Year	2014 Calendar Year
What is your source of financial support? _____	_____	_____	_____
Will your/did your parents claim you as an exemption on their tax returns?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will you/did you file a California resident income tax return?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will you/did you file a resident income tax return in another state? If yes, what state _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you/were you employed •in California? <input type="checkbox"/> Yes <input type="checkbox"/> No •outside California? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will you/did you receive loans, scholarships, or benefits that required residence outside California? If yes, attach a statement describing. <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Bank Accounts:

Checking: _____ State _____ Date established _____
 Savings: _____ State _____ Date established _____

Marital Status:

Single
 Married/Registered Domestic Partner: Date _____ State _____
 Divorced: Date _____ State _____

Colleges or Universities Attended:

From	To	Name of School	State
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do you hold any professional licenses? Yes No
 If yes, valid from _____ to _____ in state of _____

U.S. Military Service:

	Student	Spouse
Are you or your spouse currently on active duty? If yes, state of legal residence _____ Dates of military service _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you registered with the selective service? If yes, state of registration _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

What state do you regard as your permanent home? _____
 How long has the state mentioned above been your home? _____
 Do you plan to remain in California after completing your education? Yes No

Signature required on reverse

If you are under 24 years of age, complete the remainder of this form. If not, please sign and date below.

If a parent is deceased, give date and place of death; otherwise provide all information required.

Father: _____ Date _____ Place _____ Mother: _____ Date _____ Place _____

Are your parents currently on active duty in the United States military? Father Yes No Mother Yes No
 Stationed in California: From _____ to _____ From _____ to _____
 Stationed outside California: From _____ to _____ From _____ to _____
 State of legal residence: _____

Are your parents divorced or permanently separated? Yes No **Have you resided with your other parent since divorce or separation?** Yes No
 If yes, who have you been living with? _____
 Mother Father Other _____ (state relationship)
 Dates of residence with person noted above:
 From _____ to _____ address _____
 From _____ to _____ address _____

Student's Father:

Father's full name: _____ Last _____ First _____ Middle _____
 Address: _____ Number, Street, City, State, Zip _____

Dates of Father's Physical Presence in California: Continuously since birth
 From _____ to _____ From _____ to _____

If he claims California residence but has been absent from the state for more than six weeks during the last 12 months, please attach a statement explaining his absence.

Does he have a driver's license? Yes No State I.D. card? Yes No
 If yes, in what state? _____ Date issued _____ Last renewed _____
 Does he own a motor vehicle? Yes No
 If yes, date of registration _____ In what state? _____
 Did he/will he file a California income tax return on his total income for:
 Last calendar year? Yes No If no, what state? _____
 This calendar year? Yes No If no, what state? _____
 Did he/will he claim you as an exemption on his federal or state tax returns for:
 Last calendar year? Yes No This calendar year? Yes No

Does he claim to be a California resident? Yes No
 Is he a U.S. citizen? Yes No
 Is he a U.S. permanent resident (PR)? Yes No
 If no, has he applied for PR status? Yes No
 If yes, does he currently hold a valid immigration visa status? Yes No
 Alien registration # _____
 Date awarded _____
 Type of visa _____
 Valid from _____ to _____
 Is he registered to vote? Yes No
 If yes, in which state? _____ date _____
 Has he voted within the last 15 months? Yes No
 If yes, in which state? _____ date _____
 Bank accounts (state/date established)
 Checking _____
 Savings _____

Student's Mother:

Mother's full name: _____ Last _____ First _____ Middle _____
 Address: _____ Number, Street, City, State, Zip _____

Dates of Mother's Physical Presence in California: Continuously since birth
 From _____ to _____ From _____ to _____

If she claims California residence but has been absent from the state for more than six weeks during the last 12 months, please attach a statement explaining her absence.

Does she have a driver's license? Yes No State I.D. card? Yes No
 If yes, in what state? _____ Date issued _____ Last renewed _____
 Does she own a motor vehicle? Yes No
 If yes, date of registration _____ In what state? _____
 Did she/will she file a California income tax return on her total income for:
 Last calendar year? Yes No If no, what state? _____
 This calendar year? Yes No If no, what state? _____
 Did she/will she claim you as an exemption on her federal or state tax returns for:
 Last calendar year? Yes No This calendar year? Yes No

Does she claim to be a California resident? Yes No
 Is she a U.S. citizen? Yes No
 Is she a U.S. permanent resident (PR)? Yes No
 If no, has she applied for PR status? Yes No
 If yes, does she currently hold a valid immigration visa status? Yes No
 Alien registration # _____
 Date awarded _____
 Type of visa _____
 Valid from _____ to _____
 Is she registered to vote? Yes No
 If yes, in which state? _____ date _____
 Has she voted within the last 15 months? Yes No
 If yes, in which state? _____ date _____
 Bank accounts (state/date established)
 Checking _____
 Savings _____

Do you authorize the Residence Affairs Unit to obtain from other University of California offices any information deemed necessary for the determination of your residence status? Yes No _____ initials

Do you authorize the University of California to release to your parents information regarding your residence file? Yes No _____ initials

Signature required: I declare under penalty of perjury under the laws of the State of California that the statements on both sides of this page and any attachments submitted by me in connection with the determination of my residence are, and each of them is, true and correct.

Signature: _____

Signed in: _____ Date _____
city/county/state

Privacy Notice: All of the information requested on this Statement of Legal Residence is required (by the authority of Standing Order 110.2(a)-(d) of the Regents of the University of California) for determining whether or not you are a legal resident for tuition purposes. Your registration cannot be processed without this information. The Office of the Registrar on campus maintains the requested information. You have the right to inspect University records containing the residence information requested on this form.