

### I. Student Information

Full Legal Name: \_\_\_\_\_  
 Last Name First Name MI

Other Names: \_\_\_\_\_  
*if any, under which you have been enrolled or employed*

KSU ID: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
 MM/DD/YYYY State or Country

#### Current Address: while attending K-State

\_\_\_\_\_  
 Street and Number or Rural Route (P.O. Box not sufficient) Primary Phone  
 \_\_\_\_\_  
 City State Zip Code

#### Permanent Address:

\_\_\_\_\_ Check Here if Permanent Address is the Same as Current Address

\_\_\_\_\_  
 Street and Number or Rural Route (P.O. Box not sufficient)  
 \_\_\_\_\_  
 City State Zip Code

For Which Semester Are You Applying for Residency Reclassification: *Check ONE Semester Only*

\_\_\_\_\_ Fall Semester, 20\_\_\_\_\_ \_\_\_\_\_ Spring Semester, 20\_\_\_\_\_ \_\_\_\_\_ Summer Semester, 20\_\_\_\_\_

Type of Student: \_\_\_\_\_ Undergraduate \_\_\_\_\_ Graduate \_\_\_\_\_ Veterinary Medicine\*\*

\*\* Vet med students are not allowed to change residency status for tuition purposes once they have accepted a non-resident position in the K-State College of Veterinary Medicine.\*\*

Where and When Did Your Current Period of Physical Presence in Kansas Begin?

\_\_\_\_\_  
 City MM/DD/YYYY

Where did you live during the twelve months prior to the date listed above?

_____ City	_____ MM/YYYY	_____ MM/YYYY
_____ City	_____ MM/YYYY	_____ MM/YYYY
_____ City	_____ MM/YYYY	_____ MM/YYYY

Have you read the Guidelines for Resident Classification for Tuition Purposes? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you previously applied for residency at a Kansas Regents University? \_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes, were you given resident fee status? \_\_\_\_\_ Yes \_\_\_\_\_ No

Provide the university's name and semester and year granted residency.

\_\_\_\_\_  
 Institution Semester and Year

Attach a copy of the letter from the University Registrar and/or Admissions Office confirming your residency classification.

**II. Citizenship**

Are you a Citizen of the United States?  Yes  No

If **No**, have you been granted Immigrant or Permanent Resident status by *U.S. Immigration and Customs Enforcement*?

Yes  No

If **Yes**: attach a copy of your Permanent Residency Proof (i.e., card)

If **No**: indicate type of VISA \_\_\_\_\_ or attach proof of application for immigrant or permanent resident status.

Are you registered to vote?  Yes  No

If **Yes**: Where are you currently registered to Vote?

\_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State

If **Yes**: When did you most recently register to vote in Kansas?

\_\_\_\_\_ Month/Year

**III. Military Service**

Are you or your spouse on full-time, active duty military service living in Kansas or a member of the Kansas Army or Air National Guard?  Yes  No

If **Yes**, which state is currently listed on your military Leave and Earnings Statement? \_\_\_\_\_

How long has this state been listed? \_\_\_\_\_ Years \_\_\_\_\_ Months

**IV. Parental/Legal Guardian Information**

This information is required if: you are single and under 18 years of age; you are claimed as a dependent on your parent(s) or guardian(s) tax return; or you receive any cash or in-kind support from your parent(s) or guardian(s).

I am providing information below on my:  Parent(s)  Legal Guardian(s)

If Legal Guardian please attach a certified copy of the court order establishing guardianship. *Guardianships established for the sole or main purpose of qualifying the ward for resident tuition will not be honored.*

Do your parent(s)/guardian(s) live in Kansas?  Yes  No

If **Yes**: Where and when did each of your parent(s)/guardian(s) current period of physical presence in Kansas begin?

Parent/Guardian 1 \_\_\_\_\_  
City MM/YYYY

Parent/Guardian 2 \_\_\_\_\_  
City MM/YYYY

\_\_\_\_\_ Parent or Guardian Legal Name 1 \_\_\_\_\_ Street Address/City/State/Country

\_\_\_\_\_ Parent or Guardian Legal Name 2 \_\_\_\_\_ Street Address/City/State/Country

Did your parent(s)/guardian(s) file Kansas State Resident Income Tax Return for the most recent tax year?  Yes  No

Are either of your parent(s)/guardian(s) registered to vote?  Yes  No

If **Yes**: Where are they currently registered to Vote?

\_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State

Is at least one parent/guardian on full-time active duty military service living in Kansas or a member of the Kansas Army or Air National Guard?  Yes  No

If **Yes**, which state is currently listed on your military Leave and Earnings Statement? \_\_\_\_\_

How long has this state been listed? \_\_\_\_\_ Years \_\_\_\_\_ Months

**V. Education History**

List all colleges/universities, including Kansas State University, you have attended during the previous five years. Include dates of attendance, credit hours earned, and student resident status (for tuition purposes) at each institution

Institution Name	City, State	From: Mo/Year	To: Mo/Year	Credit Hrs Earned	Tuition Status: Resident/Non-Resident

**VI. Employment History**

List all employment, full and part time, since the date listed in section I. Student Information – when current physical presence began. Include Summer Employment

Company Name	City, State	From: Mo/Year	To: Mo/Year	Hours per Week

**VII. Financial Support and Expenses**

Do you receive financial support from others to pay living expenses such as rent, health and auto insurance, credit cards? If yes, mark the support sources:  Yes  No

Parents/Guardians  Spouse  Other Relatives  Financial Aid  Other \_\_\_\_\_

List all sources of support for the twelve months prior to the semester for which you are applying for resident tuition:

Type of Support	Name/Address	From: Mo/Year	To: Mo/Year	Amount
Employment				
Employment				
Employment				
Savings & Interest				
Family/Guardian Contribution				
Family/Guardian Contribution				
Spouse's Income				
Scholarships/Grants				
Graduate Assistantships/Fellowships				
Student Loans				
Other:				
Other:				
Other:				

List expenses for the twelve months prior to the semester for which you are applying for resident tuition. If you share expenses, list only your share of the expenses.

Type of Expense	Monthly	Total for past 12 Months
Housing	\$	\$
Food	\$	\$
Phone, Electric, Gas, Etc.	\$	\$
Health Care/Insurance	\$	\$
Vehicle and Transportation	\$	\$
Clothing/Laundry	\$	\$
Tuition and Fees	\$	\$
Books and Supplies	\$	\$
Other:	\$	\$

**Total Expenses: \$**

Do you have health insurance?  Yes  No

If **yes**, who pays the premium?

I pay the premium  Parents/Guardian  Spouse  Employer  Other Relatives  Other:

Did you file a state income tax return for the most recent tax year?  Yes  No

If **yes**, which state? \_\_\_\_\_ *You must provide a copy of your most recent federal and state income tax returns.*

Were you claimed as a dependent on another person's most recent federal income tax return?  Yes  No

If **yes**, did this person file a state income tax return?  Yes  No  
*You must provide a copy of page 1 of this person's most recent federal and state income tax returns.*

Do you own/drive a vehicle?  Yes  No

If **yes**, was Kansas personal property tax paid on the vehicle you currently own/drive?  Yes  No

If **yes**, in which year was the tax paid? \_\_\_\_\_

Provide information concerning the vehicle you own/drive:

\_\_\_\_\_ *State*      \_\_\_\_\_ *License Plate Number*      \_\_\_\_\_ *Date Plate Obtained*      \_\_\_\_\_ *Vehicle Owner*

Provide information concerning your current driver's license:

\_\_\_\_\_ *State*      \_\_\_\_\_ *License Number*      \_\_\_\_\_ *Date Issued*

### **VIII. Additional Information**

Why did you come/return to Kansas?

Educational Purposes  Military Service  Employment  Other \_\_\_\_\_

Other than being physically present in Kansas, what relationships or obligations connect you to the state, making it your permanent home?

How long do you plan to remain in Kansas?

Have you or your spouse been licensed or certified to practice a profession in Kansas?  Yes  No

Identify Professional License or Certification (i.e., Doctor, Lawyer, Nurse, Teacher, etc.): \_\_\_\_\_

What are your plans after your academic work is completed?

If there are any other pertinent facts not covered by the previous questions/answers, then please summarize:

**Student Privacy Notice for Persons in the European Union:**

Please be aware that Kansas State University will be processing your personal data.

K-State will be processing your personal data because it furthers K-State’s performance, or preparation for performance, of a contract or agreement to provide educational and other services to you, or because you have consented to that processing. Kansas State’s Privacy Notice and Request for Consent (<http://www.k-state.edu/registrar/students/gdpr/index.html>) details the nature and purposes of that processing.

Kansas State’s Privacy Notice and Request for Consent also sets forth in detail your rights with regard to Kansas State’s processing of your personal data. These rights may include the right to request access to your personal data and the rectification of inaccurate data, the erasure or the restriction of processing of your data in certain circumstances. You may exercise these rights by contacting Kansas State using the following email address: [gdpr@ksu.edu](mailto:gdpr@ksu.edu).

Please read K-State’s Privacy Notice and Request for Consent (<http://www.k-state.edu/registrar/students/gdpr/index.html>) carefully. Your signature below will serve as your written consent.

**Student Signature:** \_\_\_\_\_

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

I understand that falsified information can result in financial obligation (nonresident tuition) to, and dismissal from, the University and that making a false writing is a felony under Kansas Law ([K.S.A. 21-5824](#)). I also understand that information from my application for admission and other university records will be considered as part of this verification." with student date and signature. Removing the requirement of signature in presence of notary and signature of notary.

**Return Signed and Completed Forms to:**

**Continuing Undergraduate Students only:** Applications are accepted 45 calendar days prior to and 30 calendar days after the start of the semester.

**Vet med students** are not allowed to change residency status for tuition purposes once they have accepted a non-resident position in the K-State College of Veterinary Medicine.

New and Readmitted Undergraduate Students:

**Office of Undergraduate Admissions**  
119 Anderson Hall  
919 Mid Campus Drive North  
Manhattan, KS 66506  
785-532-6250/800.432.8270  
E-mail: [k-state@k-state.edu](mailto:k-state@k-state.edu)

New and Readmitted Graduate Students:

**Graduate School**  
119 Eisenhower Hall  
1013 Mid-Campus Drive  
Manhattan, KS 66506  
785.532.6191/800.651.1816  
E-mail: [grad@k-state.edu](mailto:grad@k-state.edu)

Current/Continuing Students:

**Office of the Registrar**  
118 Anderson Hall  
919 Mid-Campus Drive North  
Manhattan, KS 66506  
785.532.6254  
E-mail: [registrar@k-state.edu](mailto:registrar@k-state.edu)