



wccadmissionsinfo@yccd.edu



ycadmissions@yccd.edu

RESIDENCY RECLASSIFICATION REQUEST

Use this form to request a review of your residency status. To be classified as a resident, you must have been physically present in California for more than one year immediately prior to the term requested and demonstrate the intent to make California your permanent home. Additional factors may also apply to residency reclassification.

All sections must be completed, and documentation is required. Documents submitted must be valid and legible, and dated at least one (1) year and one (1) day prior to the start date of the term requested.

Name: _____ Student ID#: _____

Phone #: _____ Home College: Yuba College Woodland Community College

Enrollment Term: Fall Spring Summer Year: _____ Birthdate: _____

Visa/Immigration Status*: US Citizen Permanent Resident: _____ Date Issued: _____

Asylee/Refugee DACA Other Visa: _____

**Non-US citizens must provide documentation of citizenship status in addition to required documentation.*

PHYSICAL PRESENCE AND INTENT TO RESIDE

19 years old or older at the start of the term: complete questions in this section as they pertain to you.

18 years old or younger at the start of the term: complete questions in this section as they pertain to your parent(s)/guardian(s):

Parent/Legal Guardian: _____ Relationship to Student: _____

Permanent Address: _____ City: _____ State: _____ Zip: _____

Do you intend to make California your permanent residence? Yes No

Have you lived in California **continuously** for the last 24 months? Yes No

If No, list the states you lived in the past 24 months and the dates you lived there:

State: _____ Start Date: _____ End Date: _____ State: _____ Start Date: _____ End Date: _____

What date did your **current** stay in California begin? _____

Since this date, have you:

Maintained voter registration and voted in a state other than California? Yes No

Been a petitioner for divorce in a state other than California? Yes No

Attended an out-of-California institution as a resident of that state? Yes No

Declared non-resident status for state income tax purposes? Yes No

Do you possess a valid driver's license or ID card? Yes No If Yes, State: _____ Date Issued: _____

Do you have current registration of a motor vehicle? Yes No If Yes, State: _____ Date Issued: _____

Do you own or rent property in California? Yes No If Yes, Date Purchased/Move In Date: _____

Do you have an active California bank account? Yes No If Yes, Date Opened: _____

Were you employed in California in the past year? Yes No If Yes, Employer: _____

List the state and year in which your last two state income tax returns were filed:

State: _____ Year: _____ State: _____ Year: _____

FINANCIAL INDEPENDENCE

Did your parent(s) or legal guardian(s) claim you as a dependent exemption for the state and/or federal tax purposes for the current or previous calendar years? Yes No

Have you received or will you receive more than \$750 in financial assistance from your parent(s) or legal guardian(s) in the current or previous calendar years? Yes No

Have you lived or will you live for more than six weeks with your parent(s) or legal guardian(s) during the current or previous calendar years? Yes No

If you answered "Yes" to any of the questions in this section you will need to provide proof of your parent(s) or legal guardian(s) residency status.

MILITARY STATUS

Are you a member of the U.S. Armed Forces? Yes No If Yes, Home of Record State: _____

Are you a dependent of a member of the U.S. Armed Forces? Yes No If Yes, Relationship: _____

If Yes to either above: Active Duty: State Currently Stationed: _____ No Longer Active: Discharge Date: _____

REQUIRED DOCUMENTATION

Select two documents from the list below to be included with this form. Additional documentation may be requested to determine eligibility.

One document must be dated and include information from at least one year and one day prior to the start date of the term requested. Documents must include name and address.

- | | |
|--|--|
| <input type="checkbox"/> California Driver's License or ID Card | <input type="checkbox"/> Voter's Registration in California |
| <input type="checkbox"/> California Motor Vehicle Registration | <input type="checkbox"/> Ownership of property or rental/lease agreements |
| <input type="checkbox"/> Federal or California State Income Tax Forms | <input type="checkbox"/> Utility bills (electric, gas, water, phone) |
| <input type="checkbox"/> License for CA professional practice or business | <input type="checkbox"/> Statements of active bank account with California address |
| <input type="checkbox"/> Military records showing CA as the home of record | <input type="checkbox"/> Transcripts showing continuous enrollment at a CA school |
| <input type="checkbox"/> Proof of employment in California | <input type="checkbox"/> Evidence of public assistance, rehabilitation, unemployment, or other California State services |

IMPORTANT INFORMATION

You are not eligible for residency if you:

- | | |
|---|--|
| • Have a valid Driver's License or ID Card from another state | • Declare non-residence for state income tax purposes |
| • Possess a vehicle registered with another state | • Attend an out of state institution as a resident of that state |
| • Maintain voter registration and voting in another state | • Petition for divorce in another state |

Out of State documents will invalidate all other documentation submitted. Only California documents will be accepted.

Some visa/immigration statuses prohibit a student from establishing residency, regardless of the length of time in California. Contact Admissions and Records for more information.

CERTIFICATION

I DECLARE UNDER PENALTY OF PERJURY THAT THE STATEMENTS AND DOCUMENTS SUBMITTED BY ME ARE TRUE, ACCURATE AND CORRECT. I further understand that all materials submitted by me for the purposes of residency reevaluation become property of Yuba Community College District. I understand that falsification, withholding pertinent data, or failure to report changes in residency may result in my dismissal.

Student Signature: _____ Date: _____

OFFICE USE ONLY: Processed by: _____ Date: _____