



COLLEGE OF THE CANYONS – OFFICE OF ADMISSIONS, RECORDS, & ONLINE SERVICES

IMPORTANT INFORMATION REGARDING RESIDENCY

College of the Canyons bases residency determinations upon various regulations and instructions from California Education Code, Federal legislation, and guidelines from the California Community College Chancellor's office. We first must determine whether an individual's visa status allows a student to establish domicile in the United States for fee purposes. If the individual's visa allows establishment of domicile, then we must determine physical presence and intent to make California the student's home of record. In both cases, **students must provide original documents showing evidence of valid status and proof of at least one year and one day's physical presence in California and intent to maintain California as home.** We also make residency determinations on students who come from other states regarding whether they are US citizens, permanent residents, or any other visa holders by first determining INS status, if applicable, and then determining if they meet physical presence and the intent to make California their home state. Attending College of the Canyons for educational purposes alone does not grant the student residency.

College of the Canyons makes the initial determination by checking areas in the application for admission, with special attention paid to any inconsistent information that might indicate that the student is a non-resident. **(Title 5 § 54010)**

There are essentially three conditions we must examine for residency purposes:

- **Legal Status** (US Citizen, Permanent Resident, Temporary Resident, Visa Status, etc., ***Title 5 § 54045***)
- **California Status** (Physical Presence and Intent to make California their home, ***Title 5 § 54020 and § 54022***)
- **Financial Independence** (***Title 5 § 54032***)

To reclassify as California resident, a student must submit the Student Affidavit Residency Reclassification together with documentation proving residency. Please note: incomplete Affidavits, or Affidavits without the required residency documentation, will not be accepted.

- Students who are ready to submit a completed Affidavit/ and or wish to schedule an appointment to meet with Sonia De Leon may email your questions, email your completed affidavit, and your request for an appointment to residency@canyons.edu.

It should be noted, the burden rests with the student to provide residency documentation. Title 5 § 54026 and Title 5 § 54010, Subsection (c), gives College of the Canyons the right to require information as deemed necessary and subsection (d) gives the College the right to determine if the student has clearly established his/her residency and asks for more documentation if not.

Please note: Each student's residency classification is unique and it is reviewed as such. Before filling out the attached Residency Affidavit, students should discuss the information with their parents, as there may be certain financial considerations that will affect them.

TO PARENTS: To discuss the residency of your child with the College, we must receive written permission from your student. Please have your student sign the Release of Student Information form available in the Admissions Office.

CALIFORNIA RESIDENCY DOCUMENTATION - CHECKLIST:

Students may establish residency by submitting the following required documentation:

- California State taxes for the year prior to the start of term.
- A California issued driver's license or ID card.

Students who do not have California taxes must provide three forms of proof from the lists below, **at least one of which must be a primary document.**

The burden of proof is on the student to clearly demonstrate both physical presence in California and intent to establish California residence. You are required to present evidence in accordance with Education Code Sections 68040 et.seq. The documents presented must be valid, readable, ***DATED AT LEAST ONE YEAR AND ONE DAY BEFORE THE RESIDENCY DETERMINATION DATE FOR THE SEMESTER IN WHICH YOU ARE PLANNING TO ATTEND, AND BE PROPERLY IDENTIFIED WITH RESPECT TO STUDENT NAME AND ADDRESS.***

PRIMARY DOCUMENTS:

- ☐ California Income Tax
- ☐ CA driver's license or ID card
- ☐ Registering to vote and voting in CA
- ☐ Licensing from CA for professional practice
- ☐ Carrying on of business or employment in **CA**
- ☐ Vehicle registration in CA
- ☐ Recipient of CA state services
- ☐ Current W-2 Form showing address

SECONDARY DOCUMENTS:

- ☐ Ownership of residential property as primary residence
- ☐ Continuous occupancy of rented or leased property in CA
- ☐ Public Library Card
- ☐ Maintaining active checking/savings accounts in CA banks
- ☐ Selective service registration
- ☐ Federal taxes showing CA address
- ☐ Utility bills (electricity, phone, or water)
- ☐ Official high school transcripts/High School diploma (AB-540) (not college)
- ☐ Affidavit from landlord stating length of residence
- ☐ Moving personal belongings to California
- ☐ College Transcripts

FOR OFFICE USE ONLY

Classified as: _____
Initials: _____
Date: _____
Clerk's Signature: _____



COLLEGE OF THE CANYONS— ADMISSIONS & RECORDS OFFICE
RESIDENCY RECLASSIFICATION AFFIDAVIT

Please submit the questionnaire with all pertinent residency documentation. Incomplete questionnaires and/or questionnaires without documentation will be returned to the student:

(1) NAME (please print): _____
LAST FIRST MIDDLE

ADDRESS: _____
No. STREET CITY STATE ZIP

STUDENT ID#: _____ SOCIAL SECURITY#: _____

DATE OF BIRTH: _____ PHONE: _____ EMAIL: _____

This information is deemed relevant and necessary to properly determine residency for tuition purposes pursuant to Education Code Section 68041. Failure to answer all questions may cause you to be classified as a non-resident. You are required to furnish documentation in support of your responses.

RELEASE OF INFORMATION: If you would like us to be able to discuss your residency information with a third party (parent, lawyer, etc.) please provide written documentation stating who we may discuss this information and how we may discuss it with them (in person, phone, email, etc.) attached to this document.

LEGAL STATUS:

(To establish residency you need to be a US citizen, a permanent resident, an applicant for a permanent resident status, or possess a visa that does not preclude establishing domicile in the U.S.)

(2) Please mark your information below:

☐ U.S. Citizen

☐ Permanent Resident Number: _____ Issue Date: _____ Exp Date: _____

☐ Refugee/Asylee Date Issued: _____

☐ Current Visa Status: _____ Issue Date: _____ Exp Date: _____

☐ Deferred Action for Childhood Arrivals (DACA)

(3) Do you hold any of the following visas? (check below)

☐ B

☐ H-3

☐ P

☐ C

☐ J

☐ Q

☐ F

☐ M

☐ TN/TD

☐ H-2

☐ O-2

(4) Or have you held any of the above visas in the last two years?

☐ Yes

☐ No

(Note: Verification is required. You must present proof of status.)

PHYSICAL PRESENCE AND INTENT:

(Physical presence is proved by being physically and continuously present in California for one year plus one day prior to the start of the term. Intent is proven by providing evidence demonstrating intent to make California a permanent home of residence.)

- (5) You have resided in the State of California since: _____
- (6) Do you own property in California? ☐ Yes ☐ No Date purchased: _____
- (7) Do you rent property in California? ☐ Yes ☐ No
(If lease is less than 12 months old you will need to furnish previous lease as well.)
- (8) Where were your last two years state income tax returns filed? _____ and _____
State/Year State/Year
- (8a) If no taxes were filed explain _____
- (9) Are you currently registered to vote in CA? ☐ Yes ☐ If No, then: State: _____ Date: _____
- (10) Do you possess a valid CA driver's license or ID? ☐ Yes ☐ If No, then: State: _____ Date: _____
- (11) Do you have a current CA vehicle registration? ☐ Yes ☐ If No, then: State: _____ Date: _____
- (12) Selective Service Registration with CA permanent address? ☐ Yes ☐ No
- (13) Do you have an active CA bank account? ☐ Yes ☐ If No, then: State: _____ Date Opened: _____
- (14) CA License for professional practice? ☐ No ☐ If Yes, then: License No: _____ Date: _____
- (15) Were you employed in California this past year? ☐ Yes ☐ No
Employer: _____
From: _____ to _____
- (16) List additional proof of residency and attach documentation:

MILITARY STATUS:**(17) Please mark your information below:**

- ☐ Currently active or dependent of current active military
- ☐ Member discharged within the last two years
- ☐ Member discharged over two years ago (veteran)

Date of discharge: _____

Home state of record: _____

Address after separation: _____

Currently stationed in CA? ☐ Yes ☐ No

If stationed in CA, is the duty for educational purposes ONLY? ☐ Yes ☐ No

AB540 – Nonresident Tuition Exemption:

(18) Did you attend a California high school for 3 years and graduate from a California high school or obtain the equivalent thereof, such as a GED, Certificate of Proficiency, or Certificate of Completion? ☐ Yes ☐ No

School: _____ Graduation Date: _____

Note: You may eligible for the California Nonresident Tuition Exemption Request under AB540. Please contact the Residency Specialist for more information.

FINANCIAL INDEPENDENCE:

If you are an adult student and your parents are not California residents, you must demonstrate financial independence, along with physical presence and intent. If your parents are not residents of California, you will be required to be financially independent in order to be a resident for tuition purposes. Dependent children of California residents who do not meet the physical presence are entitled to resident classification during the first year they are physically present in California; however, student must establish California residency thereafter. Please see Education Code Section 68044 and Title 5 section 54020.

(19) Were you claimed as an exemption for state and/or federal tax purposes by your parent(s) in either or both of the past two calendar years? ☐ Yes ☐ No

(20) Did you receive or will you receive more than 50% of your income as financial assistance from your parent(s) in either or both of the past two calendar years? ☐ Yes ☐ No

(21) California W-2 forms with California address? ☐ Yes ☐ No

(22) Source of financial support for the past year? _____

(23) Did you live more than six weeks with your parent(s) during either or both of the past two years? ☐ Yes ☐ No

(24) Do your parents live or work in CA? ☐ Yes ☐ No

(25) If your parents are divorced/separated, indicate the state where each parent lives:

_____ Mother _____ Father

PLEASE NOTE: YOUR RESIDENCY RECLASSIFICATION AFFIDAVIT MUST BE SIGNED

I, the undersigned, declare under penalty of perjury under the laws of the State of California the information and the documentation I have provided on this form is true and accurate. FURTHER, I UNDERSTAND FALSIFICATION OR FAILURE TO REPORT CHANGE IN RESIDENCE MAY RESULT IN MY DISMISSAL FROM THE COLLEGE. I further understand that all materials submitted by me for the purpose of residency reevaluation become the property of College of the Canyons. I understand that falsification, withholding pertinent data, or if I fail to report changes in residency I may be liable for payment of all nonresident charges from which I was exempted and may be subject to disciplinary action including dismissal from College of the Canyons.

(26) Student Signature: _____

Date: _____

RESIDENCY RECLASSIFICATION – PARENT AFFIDAVIT:

**** If you, the parent, have been a resident of California for at least one year and one day prior to the start of the semester and claim your daughter/son, the student, as a dependent for income tax purposes, your daughter/son is entitled to California residency for tuition purposes. Please provide evidence as to dependency status. ****

I, _____ do declare that, if called as a witness, I could testify as follows:

1. That I am the parent of _____, a student at College of the Canyons.
2. I, further declare that I am a resident of the State of _____ * and that:
 - a. I have not claimed my daughter/son as a dependent on my federal and/or state income tax purposes since _____. (Attached copies of my federal and state income tax returns
 - b. I will not claim her/him as a dependent for federal and state income tax purposes for the calendar _____ year.
 - c. I have not provided more than 50% in financial assistance to my daughter/son since _____, and I will not provide more than 50% in financial assistance to her/him in the _____ calendar year.
 - d. My daughter/son has not lived in my home for more than six weeks in any year since _____, and she/he will not live in my home for more than six weeks in the _____ calendar year.

Parent Signature

Dated

Subscribed and Sworn to before me

On _____, 20____,

At _____ (state)

_____ (county)

PLEASE RETURN PARENT AFFIDAVIT WITH YOUR COMPLETED RESIDENCY AFFIDAVIT