Rhode Island College Residency Application for Tuition Purposes

Personal data: Complete this form after	you have r	reviewed our prog	gram	istings. Ple	ease	print cl	early.					
Date of application		Rhode Island College Identification number										
Name as it appears on Social Security card or U.S. passport	First pop		Middle initial Dat						Data at	ate of birth (mm/dd/yyyy)		
Last name	First nan							i birth (mi	n/dd/yyyy)			
Previous/Maiden Name												
Last name		First name							Middle initial			
Permanent home street address												
City			State ZIP									
Cell number	Home tele	ephone number	Email address									
Have you lived continuously in Rhode Island for one or more years as of the first day of classes for this semester? Yes No Are you a U.S. citizen or Permanent Resident (Green Card) holder? Yes No												
Did you attend a Rhode Island high school for 3 years? Yes No												
If yes, stop here and contact the Registrar's Office at records@ric.edu or (401) 456-8213.												
Is Rhode Island your legal and permanent state of residence?												
Are you in the armed forces (or a dependent) currently stationed in Rhode Island?												
If yes, stop here. There is no need to go any further.												
Please send a copy of the current military orders with assignment to Rhode Island to the Registrar's Office.												
Veteran ID number (Veteran ID number is the Social Security number of the veteran benefit holder.)												
Please note: Misrepresentation concerning residency and/or citizenship is grounds for immediate dismissal from the college and liability for all tuition and fees that may result.												
Please complete this form to be considered for in-state residency. Failure to complete all sections will result in being assessed out-of-state status for tuition calculation purposes. Please print clearly.												
Have your parents (or legal guardian) claimed yo	ou as a dep	endent on their feo	deral i	ncome tax	retur	n for the	e last	two y	ears?	Yes	No	
 A. If answer to the above question is Yes, pleas A photocopy of your parents' latest R.I. Stat A signed copy of your parents' federal incor Your parents' current rental lease (or utility I Enrollment showing one year of occupancy. Both parents' R.I. driver's licenses and vehice 	e Income T ne tax return bills) or evid	ax Return, including in for the most recer dence of property ov	i the fi it year /nersh	rst page and , including t ip indicating	d pare he firs g resie	ents' sigr st page a dency at	natory and pa : the ad	r page arents ddres	' signator s listed or	y page. n your RIC	CApplication for	
										Re	evised 3/2024	

B. If answer to the above question is NO, please supply the corresponding	g forms of documentation to determine residency status.
\square A signed copy of your federal income tax return for the most recent yea	r.
A current rental lease (or utility bills) covering your residency at the addre	
unavailable, a notarized statement from the landlord detailing dates and	•
□ Your Rhode Island driver's license and vehicle registration with an issue	
	turns for the last two years or a notarized statement from your parents stating turn for the last two years and they have no intention of such claim in the future.
Military connected student or dependent of a military connected student. orders. I understand that these documents will be reviewed to determine	I can submit proof of VA Benefits, DD214, dependency status or official military eligibility for in-state tuition.
My legal, documented and true and permanent home and place of habitation or do	omicile is (Street, City, State, ZIP Code, Country):
····	······································
Agreement:	
I certify that the information that I have provided on this application is true a	nd correct. Further, by signing this form, I agree to
abide by the rules and regulations at and fulfill all financial obligations to the	Rhode Island College.
Signature of Applicant (If under age 18, signature of parent/guardian)	Date
Paturn the compl	leted application to:
-	
-	ffice-Building 4
Rhode Isl	and College
600 Mount P	leasant Avenue
Providen	ce RI 02902
Fax (401) 456-8108
	,
I declare Rhode Island to be my state of legal residence. I ce	ertify that the information offered in
support of this application is true and correct.	
Signed: (To be signed in presence of Notery Public)	
(To be signed in presence of Notary Public)	
Notarization: (To be completed by a Notary Public). Subscr	ibed and sworn to before me this
Day of, 2	20
Notary Public:	
My commission expires:	
- •	
~	
Signature	Date

Revised 3/2024