

MCCCD DOMICILE AFFIDAVIT Dependent Student

The purpose of this domicile affidavit is to provide information in regarding to the domicile of the person listed below. Domicile means a person's true, fixed, and permanent home and place of habitation. A student whose parent/legal guardian/spouse's domicile is in this state and the parent/legal guardian/spouse is entitled to claim the person as an exemption for state and federal tax purposes is eligible for in-state tuition.

Domicile status can be determined only by a statement of facts by the student or parent/legal guardian/spouse. All questions should be read carefully before answering. If you are over the age of 24, you will need to complete and submit the Independent Student Domicile Affidavit to Admissions and Records Office/Office of Student Enrollment Services.

Parent/legal guardian/spouse of students under 24 years of age will need to complete the lower portion and reverse side of this form and submit along with:

- 1. Copy of federal income tax return (for the most recent tax year) showing the student has been claimed as a dependent (top portion of the first page will suffice).
- 2. Parent/legal guardian/spouse's proof of domicile in Arizona. A combination of the following may be used in determining parent/legal guardian/spouse's domicile:
 - Arizona income tax return
 - Arizona motor vehicle registration
 - Current employment history in Arizona
 - Source of financial support in Arizona
 - Ownership of real property*
 - Transfer of major banking services to Arizona
- Arizona voter registration
- Arizona driver's license
- Dependency as indicated on federal income tax return
- Notarized statement of landlord and/or employer
- Change of permanent residency address on all pertinent records

*Ownership of property or payment of taxes within a state is not necessarily the sole basis for determining residency. NOTE: Some visa types are not eligible for in-state residency. Contact Admissions and Records Office/Office of Student Enrollment Services for clarification.

Student Name:	Student ID #:
Student Address:	
City:	State: Zip:
Home Phone:	_ Cell Phone:
Name of Parent(s)/Legal Guardian/Spouse:	
	omit them along with this affidavit to the Admissions and tudent Enrollment Services office.
FOR OF	FICE USE ONLY
Approved Denied	
Date Signature of College Offic	 cial

MCCCD Domicile Affidavit – Dependent Student

Residency for tuition purposes is determined in accordance with state law (A.R.S. §15-1801 et. Sec.) and regulations of the Maricopa Community Colleges Governing Board. All of the Maricopa Community Colleges are subject to the above statues and regulations. Students who have questions about their residency should contact Admissions and Records Office/Office of Student Enrollment Services for clarification.

The responsibility of registration under the proper residency classification is placed upon the student. Any student who is found to be classified improperly shall be required to pay full out-of-state tuition. In determining a student's classification, the college may consider all evidence, written or oral, presented by the student and any other information received from any source which is relevant to determining classification.

ALL QUESTIONS BELOW PERTAIN TO THE PARENT/LEGAL GUARDIAN/SPOUSE

Name:			Home A	ddress:				
Home Phone:			City:		State: Zip:			
Work Phone:			When d	lid your current re	esidency in Arizona begin?	//	/ yyyy	
Citizenship Status (check one)	US Citizen	Refugee	Permanent Resident (green card)		Other (please specify/copy of I-94 may be required)			
Date present stay in Arizona began:	/ /	dd	/	Most recent state	lost recent state/country of residence PRIOR to moving to Arizona?			
In what Arizona count	y do you reside	•		If Maricopa, what	date did you move to Maricop	a County?		
Are you registered to Current driver's licens Vehicle license numbe Did your employer requi	e number: er:		State is	sued:	Date issued: Date issued:	// // // // dd	уууу уууу уууу уууу	
f yes, name of employe Employers for the past t	r:							
Employer:			Place of Emp	Employer:				
State(s) where income	e taxes were fil	ed for the p	ast two years:					
Tax year: State filed: Address: Residence listed:				Tax year: State filed: Address: Residence list	ed:			
Are you in the military Are you a military dep					ned? e stationed?			
Are you a member of an	American India	n tribe whose	reservation land	d lies in Arizona and	extends to another state?	Yes 🗌 No		
f yes: Name of Tribe			State		_ Census#			
-					ation is a violation of the Stude ut-of-state tuition for the perio	• •		

domicile requirements were not fulfilled.