

## RESIDENCY DECLARATION

**A** I claim legal residency in \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_, on the basis of:  
(specify which state or country) (month/day/year) (month/day/year)  
*(check one box only)*  
 Myself (I am 19 or older)  Parent (I am under 18 and not married)  
 Legal guardian (*Submit copy of court order appointment*)  Myself and parent

**B** Indicate if any of the following exemptions from the nonresident tuition differential apply to you (**documentation required**):

I am a full-time faculty or staff member of the University of Hawai'i, or a spouse or legal dependent of such a person. (*Attach employment contract*)

I am Hawaiian and **not** a Hawai'i resident. (*Attach an official copy of your birth certificate, and, if necessary, that of your parents/grandparents documenting Hawaiian ancestry*)

I am a member or authorized dependent of a member of the U.S. armed forces, on active duty, stationed in Hawai'i. (*See item F below.*)

I am a member of the Hawai'i National Guard or Hawai'i-based Reserves. (*See item F below.*)

I am a citizen of \_\_\_\_\_ which has no public institution of higher education granting baccalaureate degrees. (*See Exemption 2 on page 9. Attach University of Hawai'i Official Certification of Domicile Form available from the Admissions Office.*)

### If you claim Hawai'i residency, complete Sections C, D, and E

**C** Check one box even if you are an adult and independent:

I am not claimed as a dependent on my parents'/legal guardian's personal income tax form for 2007.

I am claimed as a dependent on my parents'/legal guardian's personal income tax form for 2007 and my parents'/legal guardians are legal Hawai'i residents. (**If you checked this box, the parent or legal guardian who claims you as a dependent must complete Section E.**)

I am claimed as a dependent on my parents'/legal guardian's personal income tax form for 2007 and my parents'/legal guardians are not legal Hawai'i residents.

**D** Last publicly supported institution of higher education attended, if any (including current enrollment at a University of Hawai'i campus):

\_\_\_\_\_ (specify name of institution) \_\_\_\_\_ (state or country) Attended from \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
(month/day/year) (month/day/year)

Indicate tuition paid:  Resident  Nonresident  Resident, due to exemption from nonresident tuition (specify type of exemption) \_\_\_\_\_

**E** Complete the following items on the basis of yourself **and** your parent/legal guardian (if you are under 19 or have been claimed by him/her as a dependent for tax purposes). That person must also date and sign below, and provide necessary documentation upon request.

#### MYSELF (APPLICANT)

#### MY PARENT/LEGAL GUARDIAN

<p>1. I have been living in Hawai'i continuously since: ..... month: _____ day: _____ year: _____</p> <p>2. I filed Personal Resident Income Tax Return in (<i>specify state</i>): _____          from (<i>specify years</i>): ..... to _____</p> <p>3. I registered to vote in (<i>specify state</i>): .....          on (<i>specify month/day/year</i>): ..... month: _____ day: _____ year: _____</p> <p>4. I last voted in (<i>specify state</i>): .....          on (<i>specify month/day/year</i>): ..... month: _____ day: _____ year: _____</p> <p>5. Other evidence of residency, if any (e.g., employment): .....</p> <p>6. My parent/legal guardian claims legal residency in (<i>specify state</i>): .....          from (<i>specify month/day/year to month/day/year</i>): ..... / / to / / /</p> <p>7. My parent/legal guardian is a citizen of ..... <input type="checkbox"/> US <input type="checkbox"/> Other- specify country and visa staus _____</p> <p>Date: _____ Signature of Parent/Legal Guardian _____ Relationship to Applicant _____</p>	<p>month: _____ day: _____ year: _____</p> <p>_____ to _____</p> <p>month: _____ day: _____ year: _____</p> <p>month: _____ day: _____ year: _____</p> <p>month: _____ day: _____ year: _____</p> <p>_____</p> <p>_____</p>
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**F VERIFICATION OF U. S. ARMED FORCES MEMBERS ASSIGNMENT IN HAWAII' (MILITARY ORDERS MUST BE ATTACHED)**  
(To be completed by the member's Commanding Officer)

1) \_\_\_\_\_  
 Name, rank, & branch of service of military member on active duty stationed in Hawai'i, and assigned to my unit or organization

2) \_\_\_\_\_  
 Estimated date of rotation from Hawai'i or separation from military service (whichever is earlier). Provide month/day/year; do not use "indefinite."

3) Member's relationship to applicant:  Self  Spouse  Parent  Other (specify) \_\_\_\_\_  
*Permission is hereby granted to release information to UH campus*

\_\_\_\_\_  
 Signature of Commanding Officer Printed Name

Applicant's Signature \_\_\_\_\_

Rank and Branch of Service in Hawai'i \_\_\_\_\_

Military Member's Signature \_\_\_\_\_

Phone number of Branch of Service in Hawai'i \_\_\_\_\_ Date \_\_\_\_\_