PLEASE COMPLETE THE CHANGE OF CLASSIFICATION PETITION IN INK, SIGN AND DATE. Mail or drop off petition with requested documentation at the Office of the Registrar prior to the filing deadline for the applicable quarter. See filing period on the website: http://www.ucsd.edu/current-students/finances/fees/residence/status-change.html
Financial Independence:
Are you financially independent?  ☐ Yes  ☐ No
Please describe your source of financial support (i.e., job, parents, loans) this year _______ and immediately preceding two tax years _______. Which of these years were you claimed as a dependent by parents:

Are parents currently on active duty in the United States military?
Stationed in California  ☐ Yes  ☐ No
Stationed outside California  ☐ Yes  ☐ No
State of legal residence  ☐ Yes  ☐ No
Father  ☐ Yes  ☐ No  Mother  ☐ Yes  ☐ No
from _______ to _______  from _______ to _______

Are your parents divorced or permanently separated?  ☐ Yes  ☐ No
Have you resided with your other parent since divorce?  ☐ Yes  ☐ No
Dates of residence with other parent in the last two years:
From _______ to _______ Address  From _______ to _______ Address
Who have you been living with for the past two years?  ☐ Mother  ☐ Father  ☐ Other

Name & relationship to you:

Student’s Father:
Name: Last  First  Middle
Address: Number, Street, City, State, ZIP

Dates of Father’s Physical Presence in California:  ☐ Continuous since birth
From _______ to _______  From _______ to _______

If he claims California residence but has been absent from the state for more than six weeks during the last 12 months, please attach a statement explaining his absence.
Does he have a driver’s license?  ☐ Yes  ☐ No
If yes, in what state? Date issued _______ Last renewed _______
Vehicle registration date: _______ State registered in: _______
Did he will he file a state income tax return on his total personal income for:
Last calendar year?  ☐ Yes  ☐ No  What state? _______
This calendar year?  ☐ Yes  ☐ No  What state? _______  Why? _______

Student’s Mother:
Name: Last  First  Middle
Address: Number, Street, City, State, ZIP

Dates of Mother’s Physical Presence in California:  ☐ Continuous since birth
From _______ to _______  From _______ to _______

If she claims California residence but has been absent from the state for more than six weeks during the last 12 months, please attach a statement explaining her absence.
Does she have a driver’s license?  ☐ Yes  ☐ No
If yes, in what state? Date issued _______ Last renewed _______
Vehicle registration date: _______ State registered in: _______
Did she will she file a state income tax return on her total personal income for:
Last calendar year?  ☐ Yes  ☐ No  What state? _______
This calendar year?  ☐ Yes  ☐ No  What state? _______  Why? _______

Do you authorize the University of California to release to your parents information regarding your residence file?  ☐ Yes  ☐ No

SIGNATURE REQUIRED: I declare under penalty of perjury under the laws of the State of California that the statements on both sides of this page and any attachments submitted by me in connection with the determination of my residence are, and each of them is, true and correct.

SIGNATURE: __________________________

SIGNED IN: __________________________ Date: __________________________

Privacy Notice: All of the information requested on this Statement of Legal Residence is required (by the authority of Stanford Order 110.30-69) of the Regents of the University of California for determining whether or not you are a legal resident for tuition purposes. Your registration cannot be processed without this information. The Office of the Registrar on campus maintains the requested information. You have the right to inspect University records containing the residence information requested on this form.

In accordance with the Federal Privacy Act of 1974, you are hereby notified that disclosure of your social security number is mandatory. This recordkeeping system was established prior to January 1, 1975 pursuant to the authority of The Regents of the University of California under Article 8, Section 9 of the California Constitution. The social security number is used to verify your identity.