



DOMICILE AFFIDAVIT

A **one-year residency** requirement is enforced in order for a student to be classified as an in-state student for tuition purposes.

The responsibility of registration under the proper residence classification is placed upon the student. Any student who is found to be classified improperly shall be required to pay full tuition, or be subject to dismissal from the college. In doubtful cases a certified statement of the facts or documentation of the facts may be required. **(See Arizona Revised Statutes §15-1802)**

(Please print or type)

1. Name: _____ 2. Student ID Number _____
Last First Middle

3. Phone Number (with Area Code) _____ 4. Email _____

5. Legal Address: _____

6. Mailing Address (if different): _____

7. When did your current residency in Arizona begin?
 ____ / ____ / ____
mm dd yyyy

8. What are your present sources of income?
 Self-Supporting (Self/Spouse) Parent or guardian
 If parent/guardian, their address: _____

9. If you have been attending another college or university, please list the institution and the dates of attendance.
 Institution: _____ to _____
mm dd yyyy mm dd yyyy

At the above institution, did you pay "resident" or "non-resident" tuition?

Mark one (1) of items 10 through 18, and provide the requested additional documentation with this Domicile Affidavit.

10. I am registered to vote in Arizona? **(Attach Copy of Voter Registration)** County _____ Date Registered _____

11. I have been employed in Arizona during the past two years: **(Attach Notarized Letter(s) from Employer(s) with Date of First Hire)**
 Employer _____ Employer _____
 Place of employment _____ Place of employment _____
 Date of employment ____ / ____ / ____ to ____ / ____ / ____
mm dd yyyy mm dd yyyy mm dd yyyy mm dd yyyy

12. An employer required that you, your spouse or parent be transferred to Arizona? **(Attach Notarized Letter from Employer)**
 If yes, provide name of employer _____

13. I filed an Arizona State Income Tax Return for past two years: **(Attach Copy of First & Last Page of AZ Tax Returns)**
 Tax year _____ Tax year _____

14. I have a current Arizona driver's license **(Attach Copy of Driver's License issued at least 1 year ago)**: License Number _____
 Date issued _____ Renewal: No Yes Original date issued _____

15. My Motor Vehicle is registered in Arizona. **(Attach Copy of Previous Year's Vehicle Registration)**: License Number _____
 Date issued _____ Renewal: No Yes Vehicle owned by you? No Yes

16. I am currently in the military or a military dependent. If active duty, where are you stationed? _____
Attach a Copy of Request & Authorization for Permanent Change of Military Station (AF Form 899 and/or DD214)
 If you are a military dependent, where is parent/guardian/spouse stationed? _____

17. I am a resident member of an Indian tribe whose reservation land lies in this state and extends into another state.
 If yes, which reservation _____ **(Attach Chapter House Statement/NN Voter Registration)**

18. I recently married and my spouse previously established one-year residency in Arizona.
 If yes, attach a **Copy of Marriage Certificate AND a Copy of the First & Last Page of Spouse's Previous Year's AZ Tax Return.**
My residency status: U.S. Resident Non-USA Permanent Resident Refugee or Asylee Non-USA Non-Immigrant
 Attach a **Copy of your Visa** Visa Type _____ Date Issued _____

I certify that the foregoing statements are correct.

Applicant's Signature _____ **Date** _____

APPROVED _____ **DENIED** _____ **DATE** _____
NPC Rep Signature _____

PUBLIC NOTICE OF NONDISCRIMINATION: Northland Pioneer College does not discriminate on the basis of race, color, national origin, veteran status, religion, marital status, gender, age or disability in admission or access to, or treatment or employment in its educational programs or activities. District grievance procedures will be followed for compliance with Title IX and Section 504 requirements. The Affirmative Action Compliance Officer is the Director of Human Resources, 2251 E. Navajo Blvd., Holbrook, Arizona 86025, (800) 266-7845. The Section 504 Compliance Officer is the Coordinator of Disability Resource and Access, 1001 W. Deuce of Clubs, Show Low, Arizona 85901, (800) 266-7845. The lack of English language skills will not be a barrier to admission and participation in vocational education programs. Revised 9-12-14
 Revised 06/30/15 • MPR•ECR • Marketing/Forms/R&R/DomicileAffidavit