## ALL REQUIREMENTS MUST BE MET BY THE FIRST DAY OF CLASSES

## DEADLINE FOR SUBMISSION OF PETITION

PLEASE PRINT OR TYPE

## PETITION FOR IN-STATE TUITION CLASSIFICATION



Semester_	
Year	

Instructions: Please answer all questions completely, using "none" or *N/A* for those questions which do not apply to your situation. If you need more space or wish to make a further statement, feel free to attach pages, clearly indicating the subject of each addition. Submit the petition to the appropriate office well in advance of the term for which the request is being made.

PETITION	NER NAME:		Student ID:					
DATE OF	BIRTH:			Te	ephone number:			
Email:						Age:		
	•				s. Provide inclusive month, le, parent's home, school,	•	ence includ	ling
From To								
	_							
From To								
From To	٦							
Circle One	City	State	Zip	Reason				
YES NO 3. D  YES NO 4. A  YES NO 5. A	o you intend to (or h	ave you) est  New Mexico  olled, or have	ablish(ed)	New Mexico residence of Spouse:	h in the previous year? If y	ng residence in all ot		
From To	Institution			City	e/State	C	lassified a R	
							YES YES	NO NO
date	id you graduate from or GED date. HS Na ist all employer's add	ame:					d graduati -	on
From To	Employer			City	•	State FT Po	ermanent	
					<del></del>			

8. Did your parents or legal guardian claim you as a dependent on federal tax returns in the immediately preceding tax year?  If yes, who?  Parents  Mother  Father  Guardian
If under the age of 23, a duplicate copy of pages one and four of Form 1040 EZ or 1040-EZ is required.
9. If you are less than 19 years of age or answered "yes" to question 8, please provide the following information:
Parent/Guardian Name:
Address:
CityState Zip Reason
If parent' addresses differ, explain:
YES NO 10. Are you registered to vote in New Mexico? If yes, Voter Registration Number:
YES NO 11. Did you file a New Mexico Personal income Tax Report in the immediate preceding year?  What state is currently withholding state income tax from your salary?
YES NO 12. Do you own a motor vehicle? If "yes", License Number: State Exp
YES NO 13. In the previous year, were you a participant in a tuition reciprocity, student exchange program or the recipient of a competitive or athletic scholarship? Amount of Scholarship:
YES NO 14. Are you receiving financial assistance from any state other than New Mexico? If yes, complete the following:
Name of Agency:
State: Date Received:
YES NO 15. Have you separated from the U.S. Armed Forces in the previous two years? If yes, complete the following:
Home of record on original entry papers:
Home of record on separation papers (DD-214):
YES NO 16. Are you in the United States on a non-immigrant visa? If yes, please provide the following information:
Country of citizenship: Date of entry into the U.S.:\
Type of visa: F-1, F-2 J-1, J-2, H-1, H-2
YES NO 17. Are you a Citizen or Permanent Resident of the United States? If you are a <i>Permanent Resident</i> please provide your registration number and a copy of your card with your application.  Permanent Resident Registration Number:
I certify that the above is true and correct to the best of my knowledge. I am aware that the Institution may cancel my admission or registration for any false or misleading statement on this petition and assess retroactive tuition and fees.  Date:Petitioner Signature:
OFFICE USE ONLY
Approved Denied Denied Spring Summer YEAR