



Residence Information Affidavit

Office of the Registrar | Mail Code L-109 | 3181 S.W. Sam Jackson Park Rd. | Portland, OR 97239-3098
503-494-7800 | 800-775-5460 | www.ohsu.edu/registrar | regohsu@ohsu.edu

For more information about Oregon residency for tuition purposes, visit www.ohsu.edu/registrar and click on Oregon Residency. For eligibility criteria, see OHSU [Policy 02-10-010 Student Residency for Tuition Purposes](#).

Section 1: Applicant Background

Name (print) _____ Student ID Number _____
Last First Middle

Present Mailing Address _____
Number & Street City State Zip

Email _____ Phone _____

Permanent Mailing Address _____
Number & Street City State Zip

Age _____ Date of Birth _____ Place of Birth _____

Degree and Program of Study (e.g., MD; MPH Epidemiology) _____

First Year and Term of enrollment: Year _____ Term _____

1 For what term are you seeking residence classification? Year _____ Term _____

2 Have you previously applied at this institution for a change in residence status for tuition purposes? Yes No

If "yes," indicate term _____ and year _____

3 Where and when did you graduate from high school? Name of high school _____
City/State _____ Grad Date _____

4 If you graduated from an accredited high school or home school in Oregon no more than 7 years ago: Has at least one of your parents or legal guardians continued to reside in Oregon since you completed high school? Yes No (If yes, attach proof of parent/guardian residence.)

5 When did your most recent continuous stay in Oregon begin? Month _____ Day _____ Year _____

6 Since your most recent continuous stay in Oregon began, have you attended a private or public college, university or community college?
 Yes No

7 If you answered "yes" to question 6, please indicate the institution(s), term, year and credit hours of enrollment in the table provided.
(Attach additional pages if necessary)

Name of Institution	Term	Year	Credit Hours

8 Have you ever paid in-state tuition at a public college or university (including community college)? Yes No

9 If "yes" to question 8, please indicate where and dates of attendance.

From _____ to _____ Name of institution _____ Location _____

From _____ to _____ Name of institution _____ Location _____

10 Are you a citizen of the USA? Yes No If "no," attach a copy of both sides of Resident Alien Card, Form I-94, or other documentation reflecting your visa type or current status.

11 Have you received financial assistance from a state or government unit or agency (other than Federal Student Financial Aid) during the past 12 months? Yes No

If "yes," indicate state, agency, and explain: _____

Will you be receiving such assistance during the next 12 months? Yes No

If "yes," indicate state, agency, type of assistance, disbursement date, and explain: _____

12 List totals of your expenses and financial resources for the past 12 months:

a. Expenses:

Total Expenses: (includes rent/mortgage, utilities, car payment, insurance, gas, groceries, spending money, etc.) \$ _____

b. Financial Resources:

Self –Support: (includes wages, salary, commission, unemployment benefits, alimony, etc.)	\$	Identify source(s):
Support from parent, guardian or other person not including spouse: (includes room and board, tuition assistance, other general monetary support)	\$	Identify relationship:
Support received from federal or state financial aid:	\$	Identify type of aid:
Other sources of support: (includes spousal income, gifts, loans, savings, inheritance, trusts, stocks, VA benefits)	\$	Identify specific source(s):

Section 2: Dependent or Independent

I am applying as (select one):

A Financially **Dependent** Person

A Financially **Dependent** Person has been claimed as a dependent on the federal and state income tax returns of another person (except for a spouse) during the immediately preceding tax year; or has received in the immediately preceding calendar year, and will receive during the current calendar year, one-half or more of their support, in cash or in kind, from another person or persons, except for support received from their spouse.

If you are applying as a Financially Dependent Person, your parent, legal custodian, or other person upon whom you are dependent, must complete Section 3 of this form providing proof of his/her Oregon domicile. Verification of your dependent status must be documented by submitting a true and correct copy of that person's **state and federal income tax returns** (top portion listing exemptions and signature section only)* for the most recent tax year.

** (The extent of disclosure required concerning state and federal tax returns is limited to the number of dependents claimed and the signature of the taxpayer and shall not require disclosure of financial information contained in the returns.)*

A Financially Dependent student becomes eligible for Oregon residency starting with the first term after the person they are dependent upon meets the requirements for residency and the student applies for reevaluation of residency.

A Financially **Independent** Person

A Financially **Independent** Person has not been claimed as a dependent during the immediately preceding tax year, and will not be claimed as a dependent during the current tax year, on the federal or state income tax returns of any other person (except for a spouse); **and** has not received in the immediately preceding calendar year, and will not receive during the current calendar year, one-half or more of their support, in cash or in kind, from another person or persons, except for support received from their spouse.

If you are applying as a Financially Independent Person, you must complete Section 3 of this form. To substantiate your financial independence, you are required to submit appropriate documentation:

1. A true and correct copy of your state and federal income tax returns for the tax year immediately prior to the year in which this application is made. If you did not file state and federal income tax returns because of minimal or no taxable income, documented information concerning the receipt of such nontaxable income must be submitted.
2. A true and correct copy of your W2 form filed for the previous tax year
3. Other documented financial resources. Such other resources may include, but are not limited to, the sale of personal or real property, inheritance, trust fund, state or financial assistance, gifts, loans, earnings, or savings of the spouse of a married student.

A Financially Independent Student must meet the residency requirements at the time of matriculation.

Final Steps

If applying as a Financially Independent Person, only the student must sign this affidavit; if applying as a Financially Dependent Person, both the student and the person claiming the student as a dependent must sign this affidavit.

TO BE SIGNED BY STUDENT

By providing my name, I swear that the information supplied by me in this affidavit is complete, true and correct.

Signature of student

TO BE SIGNED BY PERSON COMPLETING SECTION 3 FOR A DEPENDENT STUDENT

By providing my name, I swear that the information supplied by me in this affidavit is complete, true and correct.

Signature of parent, guardian or other person completing section 3

When completed, return this form to: regohsu@ohsu.edu, or
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