INSTRUCTIONS FOR COMPLETING A PETITION FOR CHANGE IN CLASSIFICATION FOR TUITION PURPOSES

Submit the completed petition and all supporting documentation to the following address (faxes and emails are not accepted):

University of Maryland Baltimore Office of the Registrar: Residency Reclassification Services 601 W. Lombard St. Suite 240 Baltimore, MD 21201

Email: residency@umaryland.edu for any questions

IMPORTANT INFORMATION REGARDING PETITIONS:

- The petition below is based upon USM BOR VIII-2.70 Policy on Student Classification for Admission and Tuition Purposes ("Policy"), which contains the requirements for establishing in-state classification and which is found at https://www.usmd.edu/regents/bylaws/SectionVIII/VIII-2.70.pdf.
- This Petition must be completed by the **Student**.
- The petition submission deadline is the **FIRST** day of classes for the semester/term for which you are seeking in-state status. See https://www.umaryland.edu/petition/ for specific semester/term deadline dates
- Read the petition carefully and complete **ALL** sections of the petition that apply to you. **Petitions with incomplete** applicable sections, and petitions missing required supporting documentation will not be evaluated.
- If you cannot provide the required information, you must attach a separate sheet with an explanation or write your explanation in the margins of the petition.
- Only one petition may be filed per semester/term.
- Petitions and requests for retroactive reclassification for tuition purposes are not granted.
- No materials or documentation will be returned after the petition is submitted.
- The review of the petition and an <u>initial</u> determination of the classification may take as long as <u>six (6) weeks</u>, not including subsequent appeals. While petitions are under review, petitioners are required to make full tuition payment at the out-of-state rate. If the University determines that the petitioner meets all of the requirements for in-state residency, the petitioner's classification will be changed and a refund or account credit will be issued as appropriate.
- If claiming financial dependence, the person upon whom the petitioner is dependent <u>must</u> sign the petition and have their signature notarized. For your convenience there is a Notary Public at the Office of the Registrar. Please call ahead to check for availability.
- Affidavits must be typed, dated, notarized, and contain information as specific as possible including dates, addresses, amounts, etc.
- The petition refers to "the 12-month period prior to the last date to register for classes" which is defined as the twelve (12) consecutive months immediately prior to and including the last date available to register for courses in the semester/term for which the petitioner seeks in-state tuition classification.

Please note: Graduate Assistants who were admitted as out-of-state students are assessed tuition at the in-state rate only as a benefit of their employment. All out-of-state graduate assistants who have met all residency requirements and wish to change their classification to in-state must file a timely petition with the Office of the Registrar: Residency Reclassification Services in accordance with Policy requirements.

University of Maryland Baltimore PETITION FOR CHANGE IN CLASSIFICATION FOR TUITION PURPOSES

DIRECTIONS: This petition is intended for use by students who seek a change in residency classification or by those whose classification cannot be determined from the information submitted with the application for admission. Only one petition for change in classification may be filed per semester. A petitioner is the student who wishes to have their residency classification changed. All petitioners must complete Section 1 (Petitioner Information), Section 2 (Income, Support, and Expense Information of Petitioner), Section 3 (Petitioner Residency Information), and Section 6 (Affirmation of Petitioner and Person Upon Whom Dependent). Petitioners who claim financial dependence upon another person must have the person upon whom the petitioner is financially dependent complete Section 4 (Residency Information for Person Upon Whom Petitioner is Financially Dependent) and Section 6 (Affirmation of Petitioner and Person Upon Whom Dependent). Petitioners who raised the presumption that they are in the State of Maryland primarily for the purpose of attending an educational institution and who wish to rebut this presumption will need to complete Section 5 (Rebuttal Evidence) (see Section 5 for explanation). Provide documentation where required and supplement with documentation where appropriate or helpful to your circumstances.

SECTION 1: PETITIONER INFORMATION (To be completed by Petitioner) This section must be completed by the petitioner. Program (Check one): ☐ Undergraduate ☐ Graduate/Professional 1) Are you currently registered? ☐ Yes ☐ No 2) Semester & Year Admitted: 3) Current Class Status: ☐ Freshman □ Sophomore □ Junior ☐ Senior☐ Graduate/Professional 4) Name: _ 5) University ID Number: Last First MI 6) Date of Birth (mm/dd/yyyy): Address: Street 7) Daytime/Cell Telephone: _____ Zip State City 8) University email address: 9) Semester/Term & Year of Petition (cannot be a past semester/year):

10) Have you filed a residency petition before? ☐ Yes ☐ No If **Yes**, indicate semester(s) and year(s):

SECTION 2: INCOME, SUPPORT, AND EXPENS	SE INFORMATION OF PETITIONER	! (To be completed by Petitioner)
This section must be completed by all petitioners.	The documentation provided by the	petitioner should evidence any emplo

syment and earnings history through sources beyond those related to enrollment as a student in an educational institution, e.g., beyond support provided by work study, scholarships, grants, stipends, aid, student loans, etc. The petitioner must list all employers for the past two (2) years, with specific dates of employment.

1) Have you been employed within the past two years? ☐ Yes ☐ No If Yes, list all employers (most recent first) for the past 2 years. Use a separate sheet if necessary.

	Name of Employer	Address (City and State)	Dates of Employment (month/year to month/year)
,	file a state income tax return(s)? If No , please attach an explanation.	onth period prior to the last date to register for classe ☐ Yes ☐ No garding state income taxes (if necessary, attach a su	,
	Income Tax Returns	Tax Year(s) Filed	<u>for</u>
	State [indicate state(s)]:		_
	Attach:		
	a Maryland state income t tax returns in another stat * For Maryland Income Tax returns To obtain Maryland Comptroller's o	the 12-month period prior to the last date to regis ax return for that tax year, please attach an explaine or more than one state, please attach all returns, attach Maryland Comptroller's certified copies of certified copies, submit Form 129 to the Maryland ms/current forms/129.pdf or visit the Maryland Comptroller's certified copies.	nation. If you filed state income s and an explanation.) f each Maryland tax return. Comptroller's Office found at
3)	Please check one:		
·		t. I provide 50% or more of my own living and educa another person's most recent income tax return.	tional expenses and I have <u>not</u> been
	returns. (Petitioners who clai petitioner is financially deper Name of person upon whom	on another person who <u>has</u> claimed me as a depende m financial dependence upon another person must he ndent complete Section 4.) you are dependent and relationship to you:	ave the person upon whom the
	Is the person a resident of M Address of this person:		
	☐ I am not financially indepen but I have not been claimed	dent (I do not provide 50% or more of my own livi as a dependent on another person's most recent incontitioners who claim financial dependence upon anoth	

Is the person a resident of Maryland?	□ Yes □ No
Address of this person:	
☐ I am a ward of the State of Maryland.	If a ward of the State of Maryland, please submit your court decree or
documentation from your social worker	•

4) Complete the following chart below.

Expense and Sources of Funds and other Financial Support Information for Petitioner for the 12-Month Period Prior to Last Date to Register for Classes

Expense	es	Sources of Funds and other Fi	nancial Support
	Annual Amount		Annual Amount
Tuition and Fees		Income (including employment and self-employment income) • Attach paystub(s), W-2(s), 1099(s), and/or tax return(s)	
Housing and Food (on-campus or off-campus)		Contribution from another person (e.g., from family member or others, alimony, child support) • Attach statement(s) or affidavit(s) evidencing source of contribution.	
Personal Expenses (e.g., Health Insurance and Medical Expenses, Transportation, Clothing)		Trust and/or Investment Funds • Attach investment/portfolio statement(s).	
Books and Supplies (if applicable)		Loans/Grants/Fellowships/Stipends/ Scholarships • Attach your promissory note(s), with disbursement dates listed, for all loans.	
Other		Savings and Checking Account Balances Attach your bank statement(s) verifying these amounts. Other Attach supporting documentation.	
TOTAL		TOTAL	

SECTION 3: PETITIONER RESIDENCY INFORMATION (To be completed by the Petitioner)

☐ Yes ☐ No If **No**, please attach an explanation.

 a. If Yes, did you move to Maryland primarily to atter If No, attach a statement regarding the circumstar b. For the last 12 consecutive months, have you had primary purpose other than that of attending an ed 	nd an education nces that brough I the continuous	nt you to the State of intent to reside in N	f Maryland. ⁄Iaryland indefinitely	and for a
2) a. Indicate name(s) and address(es) of high school(s) atten	nded (if necessa	ıry, attach a suppler	mental sheet):	
Name of High School:				
Address:				
Street	City	State	Zip	
Dates Attended: From To				
2) b. If applicable, indicate name(s) and address(es) of all other attach a supplemental sheet):	er previously at	tended higher educ	ation institution(s) (i	f necessary,
Name of Institution:				
Address:Street	O:h .	Chata	7:	
Dates Attended: From To	City	State	Zip	
Were you assessed in-state or out-of-state tuition and fees whi	ile enrolled at tr	nat institution?		
☐ In-state ☐ Out-of-state ☐ Not Applica	ıble			
3) Did you occupy, own or rent living quarters in Maryland dur classes? ☐ Yes ☐ No ☐ If No , please attach an experience of the control of the classes.	•	2-month period prio	r to the last date to	register for
Attach, for the 12-month period prior to the last date to a photocopy of deed(s) or lease agreement(s) (i a notarized statement from the deed or leaseh and if you provide a lease, also provide cancelled re 	f your name do older specifyir	pes not appear on ng the address and	d dates of occupar	ncy),
from your rental agent if cancelled rent checks and a statement of your 12-month residence history		able or applicable,		
Link living a superstant for the 40 months would		-4 d-4- 4- u:-4-u	.	
List living quarters for the 12-month period	•			,,,,,
Address (Street Address, City and State)	Dates of C	occupancy From (n	nm/dd/yyyy) To (mn	1/dd/yyyy)
4) Are all, or substantially all, of your personal property such a	as household ef	fects, furniture, and	pets in the State of	Maryland?

5)	vehicle(s) during the 12	tion: Do you own/co-own or lead months prior to the last date to fix your name does not appear	to register for classes	? □ Yes □ No If Ye s	s, complete the following
	Year, Vehicle Make & Model	State(s) of Registration(s) (For the 12-month period prior to the last date to register for classes)	Date(s) of Original Registration & Date(s) of Renewal	Date of Vehicle Purchase or Lease	Currently Owned or Leased? If not, date vehicle sold or lease terminated
	Attach:				
	vehicles (if y months ago, and • if vehicle was and	of the current and previous re your current registration and provide a photocopy of pre- sold, provide a photocopy of was purchased within the pre-	title, or registration vious registration(s)	and lease agreement and title(s) of all veh	, were issued less than 12 icles listed),
6)	b) If Maryland, what wa If you've renewed your c) Have you possessed Attach: • a photocopy of and • if issued or re	alid driver's license? Yes las the original date of issue? license, what is the most rece a driver's license in a state of the state	nt date of issue (not e ther than Maryland wi urrently possess, period prior to the la	expiration date):thin the last 12 months	? □ Yes □ No r classes, provide a
7\	(https://mva.	f previous license or an unc maryland.gov/drivers/Pages			ng record
7)	If Yes , in what state? _ Attach:	ve been registered to vote in the		□ Yes □ No	
8)	-	laryland public assistance (i.e copy of source and type of a	•		,
9)	•	eck all boxes that apply to fully f the United States? ☐ Yes ☐	•	• • • • • • • • • • • • • • • • • • • •	• •

		If Yes, attach a photocopy of a document demonstrating current U.S. citizenship status that covers the 12-month period prior to the last date to register for classes (e.g. copy of birth certificate or passport or naturalization certificate) and skip to Section 4.
	b)	If not a U.S. citizen, what is your Country of Citizenship:
	c)	If you have a Visa, what type?
	•	Attach a photocopy of visa for the 12-month period prior to the last date to register for classes.
	d)	If you do not have a Visa, are you a Permanent Resident of the U.S.? ☐ Yes ☐ No
	•	If yes, attach a copy of Permanent Resident Card (front and back) that covers the 12-month period prior to the last date to register for classes.
	e)	Are you an applicant for Permanent Residency and have filed the I-485 Application to Register Permanent Residence or Adjust Status?
	•	If yes, attach a copy of I-485/I-797C document that covers the 12-month period prior to the last date to register for classes.
	f)	Are you an applicant for Naturalization and have filed the N-400 Application for Naturalization? ☐ Yes ☐ No
	•	If yes, attach a copy of N-400 document that covers the 12-month period prior to the last date to register for classes.
	g)	Other status (explain):
	•	Attach a photocopy of current immigration documentation that covers the 12-month period prior to the last date to register for classes.
	comp	RESIDENCY INFORMATION FOR PERSON UPON WHOM PETITIONER IS FINANCIALLY DEPENDENT letted by the person who has financially supported or claimed the petitioner as a dependent on the most recent state income
1)		you occupy, own or rent living quarters in Maryland for the 12-month period prior to the last date for the petitioner to ister for classes? ☐ Yes ☐ No ☐ If No , please attach an explanation.
		List living quarters for the 12-month period prior to the last date to register for classes.
		Address (Street Address, City and State) Dates of Occupancy From (mm/dd/yyyy) To (mm/dd/yyyy)
	V 11	and for the 42 month ported with the last data for the motitionar to resistant for alcohol.

Attach, for the 12-month period prior to the last date for the petitioner to register for classes:

- a photocopy of your deed(s) or lease agreement(s) (if your name does not appear on the deed or lease, then provide a notarized statement from the deed or leaseholder specifying the address and dates of occupancy), and
- if you provide a lease, also provide cancelled rent checks (front and back of checks) or evidence of payment from your rental agent if cancelled rent checks are not available or applicable, and
- a statement of your 12-month residence history.

2) Are all, or substantially all, of your personal property such as household effects, furniture, and pets in the State of Maryland?

Have you been employed within the past two years? ☐ Yes ☐ No	
If Yes, list all employers (most recent first) for the past 2 years.	Use a separate sheet if necessary.

If **No**, please attach an explanation.

Name of Employer	Address (City and State)	Dates of Employment
		(month/year to month/year)

4) Will you claim or have you claimed the petitioner as your dependent on your state income tax returns for the tax year(s) during the 12-month period prior to the last date for the petitioner to register for classes? ☐ Yes ☐ No If **No**, please attach an explanation.

Attach:

□ Yes □ No

3)

- photocopies of your most recent paystub(s) from all employers listed,
- signed and filed state income tax returns* with all attachments and W-2 forms or 1099(s) from all employers for the tax year ending within the 12-month period prior to the last date to register for classes. (If you did not file a Maryland state income tax return for that tax year, please attach an explanation. If you filed state income tax returns in another state or more than one state, please attach all returns and an explanation.)
- * For Maryland Income Tax returns, attach Maryland Comptroller's certified copies of each Maryland tax return.

(To obtain Maryland Comptroller's certified copies, submit Form 129 to the Maryland Comptroller's Office found at https://www.marylandtaxes.gov/forms/current_forms/129.pdf)

SECTION 5: REBUTTAL EVIDENCE (To be completed by the Petitioner)

As provided in Section II.B of USM BOR VIII-2.70 Policy on Student Classification for Admission and Tuition Purposes, either of the following circumstances raises a presumption that the student is residing in the State of Maryland primarily for the purpose of attending an educational institution, and, therefore, does not qualify for in-state classification under the Policy:

- A student is attending school or living outside of Maryland at the time of application for admission to the USM institution; or
- A student is Financially Dependent on a person who is not a resident of Maryland. A Financially Dependent student is one who has been claimed as a dependent on another person's prior year tax returns or is a ward of the State of Maryland. A student will be considered financially independent if the student provides 50% or more of his or her own living and educational expenses and has not been claimed as a dependent on another person's most recent tax returns.

If the information received by the institution has raised the presumption set forth above, the student bears the burden of rebutting the presumption by presenting additional evidence of objectively verifiable conduct to rebut the presumption and show the requisite intent to reside in Maryland indefinitely and for a primary purpose other than that of attending an educational institution in Maryland. Rebuttal evidence of intent must be clear and convincing and will be evaluated not only by the amount presented but also based upon the reliability, authenticity, credibility and relevance of the evidence and the totality of facts known to the institution. Evidence that does not document a period of at least twelve (12) consecutive months immediately prior to and including the last date available to register for courses in the semester/term for which the student seeks in-state tuition classification is generally considered an unfavorable factor under the Policy. The absence of objective, relevant evidence is generally considered an unfavorable factor. A student's statement of intent to remain in Maryland in the future is generally not considered to be objective evidence under the Policy.

For purposes of rebutting the presumption, additional evidence that will be considered includes, but is not limited to:

- 1) Source of financial support:
 - Maryland employment and earnings history through sources beyond those incident to enrollment as a student in an
 educational institution (e.g., beyond support provided by work study, scholarships, grants, stipends, aid, student loans)
 Tuition costs will be considered as a student expense only to the extent tuition exceeds the amount of any educational
 scholarships, grants, student loans, etc., or
 - b. Evidence the student is Financially Dependent, for the previous 12 months, upon a person who is a resident of Maryland.
- Substantial participation as a member of a professional, social, community, civic, political, athletic or religious organization in Maryland, including professionally related school activities that demonstrate a commitment to the student's community or to the State of Maryland.
 - Attach signed statement(s) on letterhead from the professional, social, community, civic, political, athletic, or religious organizations showing the activity and applicable dates.
- 3) Registration as a Maryland resident with the Selective Service, if applicable.
 - Attach a copy of Selective Service registration.
- 4) Evidence that the student is married to a Maryland resident.
 - Attach a copy of marriage certificate.
- 5) Evidence that the student attended schools in Maryland for grades K-12.
 - Attach a copy of transcripts with years of attendance.
- 6) Evidence showing the student uses his or her Maryland address as his or her sole address of record for all purposes including on health and auto insurance records, bank accounts, tax records, loan and scholarship records, school records, military records, leases, etc.
 - Attach evidence of your sole address of record for all purposes (including on health and auto insurance records, bank accounts, tax records, loan and scholarship records, school records, military records, leases, etc.).
- 7) An affidavit from a person unrelated to the student that provides objective, relevant evidence of a student's conduct demonstrating the student's intent to reside in Maryland primarily for a purpose other than that of attending an educational institution in Maryland.
 - Attach notarized affidavit(s) from a person(s) unrelated to you that provides objective, relevant evidence of your conduct demonstrating your intent to live permanently in Maryland.
- 8) Evidence of life and employment changes that caused the student to relocate to Maryland for reasons other than primarily educational purposes (e.g., divorce, family relocation, taking care of a sick family member)
- 9) Attach evidence of life and employment changes (e.g., employment offer letter) and other documentation supporting the life changes.

SECTION 6: AFFIRMATION OF PETITIONER AND PERSON UPON WHOM DEPENDENT (To be completed by the petitioner and/or person upon whom the petitioner is financially dependent.)

I affirm that I have read USM BOR VIII-2.70 Policy on Student Classification for Admission and Tuition Purposes, which contains the requirements for establishing in-state classification and which is found at https://www.usmd.edu/regents/bylaws/SectionVIII/VIII-2.70.pdf.

I hereby swear and affirm that all information provided in this petition is accurate and complete, and that all documents attached hereto are true and unaltered copies of the original documents requested. I understand that failure to include all requested documents will render this petition invalid. If false or misleading information is submitted, the University may, at its discretion, revoke in-state classification and take disciplinary action, including suspension or expulsion. I agree to notify the University, in writing, within fifteen (15) days of any change of circumstances that may alter my eligibility for in-state classification.

Signature of Petitioner (notary not required)		Date
Signature of person upon whom Petitioner is final		Date
(Signature must be Notarized) (Petition will not be	be accepted without notarized signature.)	
(Signature must be Notarized) (Petition will not be Sworn to and subscribed before me	,	

Attachments: Please be advised the University will be unable to accept your petition for in-state classification if photocopies of the documents are not provided <u>with</u> your petition. Petitions not having the required documentation will not be evaluated.