UNIVERSITY OF MARYLAND BALTIMORE
SUPPLEMENTAL APPLICATION FOR IN-STATE CLASSIFICATION

APPLICANTS CLAIMING IN-STATE STATUS FOR PURPOSES OF TUITION MUST COMPLETE THIS FORM AND RETURN IT WITH THE APPLICATION FOR ADMISSION

Applicant's Name: _____

Permanent address**:** _____

Length of time at permanent address _____ years _____ months

If less than 12 months, provide previous address:

_____

Length of time at previous address _____ years _____months

UMB ID or Social Security Number: _____

Semester/Year Applying For: _____ School/Program Applying To:_____

U.S. Citizen? oYes oNo If No, Type of Visa: _____ Expiration Date: _____

Alien Registration #: _____ Issue Date: _____

List ALL secondary schools, colleges, universities, professional schools and other educational institutions, which you have attended or are now attending. Use a separate sheet if necessary.

Name and Location of High School	Dates of Attendance	Date of Graduation

Name and Location of College or University	Dates of attendance	Date of graduation

Employer (Firm, City, State)	From MM/YY To MM/YY	Salary Earned	FT/PT

RESIDENCY INFORMATION

Do you wish to be considered for in-state tuition status? o Yes o No (If yes, you must complete this section of the application.)

IF ANY OF THE CATEGORIES BELOW APPLY, PLEASE CHECK THE APPROPRIATE BOX, PROVIDE REQUESTED INFORMATION AND/OR DOCUMENT, AND GO TO ITEM 10.

o **I am a part-time (50%) or full-time regular employee of the University System of Maryland or, I am the spouse of, or am financially dependent upon a parent or legal guardian who is, a regular employee of the University System of Maryland.**
Please indicate relationship: _____
Please attach a letter of verification from the Human Resources Office of the campus at which you or your spouse or parent or legal guardian is employed.

o **I am a full-time active member of the U.S. Armed Forces whose home of residency is Maryland or one who resides or is stationed in Maryland, or the spouse or a financially dependent child of such a person.** Please attach a copy of your deed or lease (if applicable), or verification from the service that you have declared Maryland as your "home of residency" (if applicable); and the most recent assignment orders.
Also, please indicate date of expected separation from the military _____

o **I am a veteran of the United States Armed Forces who received an honorable discharge within the past 12 months and received my high school education in Maryland.** Please attach a copy of form DD-214 and documentation of enrollment in a Maryland high school for a minimum of three years, and, graduation from a Maryland high school or receipt of a GED diploma in Maryland.

If none of the above is checked, applicants seeking in-state status must complete the following questions. Failure to complete all of the required items may result in a non-Maryland resident classification and out-of-state charges being applied. Residency classification information is evaluated in accordance with the University System of Maryland policy on residency. The applicant may be contacted for clarification of an item, or for additional information as necessary.

(OVER)

PLEASE CHECK ONE:

o **I am financially independent.** I have earned taxable income and I have not been claimed as a dependent on another person's most recent income tax returns. If you checked here, go to item 1 below.

o **I am financially dependent** on another person who has claimed me as a dependent on his/her most recent income tax returns, or I am a ward of the State of Maryland. If a ward of the State, please submit documentation and go to item 9. Otherwise, if you checked here, please fill out items **a. – f.** and **have this person sign at "g."**

a. Name of person upon whom dependent and relationship to applicant:
_____

b. How long have you been dependent upon this person?
_____

c. Is the person a resident of Maryland? o Yes o No

d. Address of this person:_____

e. Is this person a citizen of the United States? o Yes o No

i. If no, type of visa: _____ ii. Expiration date of visa: _____

iii. Alien Registration No. _____ iv. Date of Issuance: _____

f. Has this person filed a Maryland state income tax return for the most recent year on all earned income including income earned outside of Maryland? o Yes o No

If yes, list actual years Maryland income tax returns have been filed within the past 3 years.

i. **Years filed**: _____

ii. **If a Maryland tax return has not been filed within the last 12 months, state reason(s):**
_____

g. Signature of this person: _____

The Student Applicant is responsible for completing items 1 - 9.

1. **Are you residing in Maryland primarily to attend an educational institution?** o **Yes** o **No**

2. **Are all, or substantially all of your possessions in Maryland**? o **Yes** o **No**

3. **Do you possess a valid driver's license?** o **Yes** o **No**

   a. If yes, initial date of issue_____ b. In what state? _____

   c. Most recent date of issue _____ d. In what state? _____

4. **Do you own any motor vehicles?** o **Yes** o **No**

   a. If yes, initial date of registration? _____ b. In what state? _____

   b. Most recent date of registration?_____ d. In what state? _____

5. **Are you registered to vote?** o **Yes** o **No**

   a. If yes, in what state? _____ b. Date of registration: _____

   c. Were you previously registered to vote in another state? _____

6. **Have you filed a Maryland state income tax return for the most recent year?** o **Yes** o **No**

   If yes, list years you have filed Maryland income tax returns within the past 3 years.

   a. Years filed: _____

   b. **If you did not file a tax return in Maryland within the last 12 months, state reason(s):**
   _____

7. **Is Maryland state income tax currently being withheld from your pay?** o **Yes** o **No** **If no, provide explanation.**
   _____

8. **Do you receive any public assistance from a state or local agency other than one in Maryland?** o **Yes** o **No**

   a. If yes, please explain_____

9. I certify that the information provided is complete and correct. I understand that the University reserves the right to request additional information if necessary. In the event the University discovers that false or misleading information has been provided, the Student Applicant may be billed by the University retroactively to recover the difference between in-state and out-of-state tuition for the current and subsequent semesters.

_____ _____

Signature of Applicant Date