

Petition for In-State Residency for Purpose of Tuition

Petition decisions are based on Oklahoma State Regents Policy Chapter 3 (3.18) of the [Oklahoma State Regents' Policy and Procedures Manual](http://okhighered.org/state-system/policy-procedures/) (okhighered.org/state-system/policy-procedures/).

If you are receiving scholarships, loans, grants, or other financial aid, please seek advice from OU Health Sciences Student Financial Aid before submitting this petition to determine how in-state reclassification may affect your aid.

OU Health Sciences Student Financial Aid
 865 Research Parkway, Suite 240
 Oklahoma City, OK 73104
 Phone: (405) 271-2118
 Office Hours: 8 AM-5 PM, Monday-Friday

Instructions

1. Answer all questions on pages 1-5 of this form and attach supporting documentation as indicated.
2. Mail petition and supporting documentation to Health Sciences Recruitment & Admissions. It is recommended that all documentation be submitted before the first day of classes for the semester in question. Deadlines for submitting the petition and related documents are as follows:

Fall – October 31
Spring – March 31
Summer – June 30

SUBMIT TO

OU Health Sciences Recruitment & Admissions

Mail: 1106 N. Stonewall Avenue, Suite 300
 Oklahoma City, OK 73117

Phone: (405) 271-2359

Fax: (405) 271-2480

Email: Admissions@ouhsc.edu

Allow 2-3 weeks for processing and evaluation of the petition.

Failure to include sufficient documentation at the time of submission will result in a denied decision.
 All documentation is subject to verification by the University.

SECTION 1 – STUDENT IDENTIFICATION INFORMATION

Student Name (First, Middle, Last)

Student ID Number

Current Address (Street)

City, State, Zip

Years at this address

Permanent Address (Street)

City, State, Zip

Years at this address

Moved to Oklahoma FROM (Location & Date)

Phone Number

E-Mail Address

Citizenship Status (Check One):

Visa Type

- U.S. Citizen Permanent Resident Foreign National Other _____

SECTION 2 – RECLASSIFICATION RATIONALE

Check the box below that best fits your circumstances; attach supporting documentation.

BASIS FOR CONSIDERATION	SUGGESTED SUPPORTING DOCUMENTATION
<input type="checkbox"/> A I graduated from an Oklahoma high school and resided in Oklahoma with a parent or legal guardian for at least two years prior to graduation from high school and have not established domicile in another state.	<ul style="list-style-type: none"> Parent/guardian's employment verification in Oklahoma Parent/guardian's most recent Federal Income Tax Return form 1040 or legal documentation of custody or guardianship Parent/guardian's Oklahoma State Income Tax Return form 511 Official Oklahoma high school transcript (If not a U.S. citizen) documentation of parent/guardian's immigration status or completed and notarized Affidavit of Intent
<input type="checkbox"/> B I am a dependent person and my parent or legal guardian (who is a U.S. citizen or lawful permanent resident) has lived continuously in Oklahoma for at least 12 months and has established domicile in Oklahoma.	<ul style="list-style-type: none"> Parent/guardian's employment verification in Oklahoma Parent/guardian's most recent Federal Income Tax Return form 1040 or legal documentation of custody or guardianship Proof of parent/guardian's Oklahoma domicile (ex: most recent Oklahoma State Income Tax Return form 511; Oklahoma mortgage statement, home warranty deed, or lease agreement spanning at least 12 months) (If not a U.S. citizen) documentation of parent/guardian's immigration status
<input type="checkbox"/> C I am a dependent person and my parent or legal guardian (who is a U.S. citizen or lawful permanent resident) has come to Oklahoma to work full-time or practice a profession on a full-time basis.	<ul style="list-style-type: none"> Parent/guardian's most recent Federal Income Tax Return form 1040 or legal documentation of custody or guardianship Proof of parent/guardian's Oklahoma domicile (ex: most recent Oklahoma State Income Tax Return form 511; Oklahoma mortgage statement, home warranty deed, or lease agreement spanning at least 12 months) Current letter from parent/guardian's employer on company letterhead that is dated, signed by a company official. The information should include date of hire, title of position, and verifies full-time status. (If not a U.S. citizen) documentation of parent/guardian's immigration status
<input type="checkbox"/> D I am an independent person, am a U.S. citizen or lawful permanent resident, have lived continuously in Oklahoma for at least 12 consecutive months (not attending a higher education institution), and have established domicile in Oklahoma.	<ul style="list-style-type: none"> Employment verification in Oklahoma Most recent Federal Income Tax Return form 1040 Proof of Oklahoma domicile (Oklahoma State Income Tax Return form 511; Oklahoma mortgage statement, home warranty deed or lease agreement spanning at least 12 months) Documentation of self-support while living in Oklahoma
<input type="checkbox"/> E I am an independent person, am a U.S. citizen or lawful permanent resident, and have come to Oklahoma to work full-time or to practice a profession on a full-time basis.	<ul style="list-style-type: none"> Most recent Federal Income Tax Return form 1040 Proof of Oklahoma domicile (Oklahoma State Income Tax Return form 511; Oklahoma mortgage statement, home warranty deed, or lease agreement spanning at least 12 month) Current letter from employer on company letterhead that is dated, signed by a company official, indicates date of hire, and clarifies full-time employment status, OR other proof of full-time employment in Oklahoma
<input type="checkbox"/> F I married an individual who is a U.S. citizen or Permanent Resident (approved green card holder) that has already established Oklahoma domicile and recognized as in-state.	<ul style="list-style-type: none"> Copy of marriage license Spouse's Oklahoma State Income Tax Return form 511 Verification of spouse's employment in Oklahoma Copy of current Oklahoma mortgage statement or lease agreement spanning at least 12 months
<input type="checkbox"/> G I am (or am the dependent of an individual) on full-time, active-duty status of more than thirty (30) days with the uniformed services and stationed in Oklahoma.	<ul style="list-style-type: none"> Copy of member's current orders or letter from Oklahoma commanding officer verifying member's full-time active status in Oklahoma If a dependent, parent/guardian's most recent Federal Income Tax Return form 1040 or legal documentation of custody or guardianship

<input type="checkbox"/> H I am a dependent of an individual currently serving full time in the U.S. military or uniformed services whose "home of record" is Oklahoma.	<ul style="list-style-type: none"> • Copy of enlistment document • Copy of member's current orders • Most current military leave and earnings statement • If a dependent, parent/guardian's most recent Federal Income Tax Return form 1040 or legal documentation of custody or guardianship
<input type="checkbox"/> I I am the spouse/dependent of an individual currently serving as a member of the active uniformed services of the United States on full-time active-duty status of more than thirty (30) days and Oklahoma is NOT the home of record. I will be using Chapter 30 or 33 GI Bill benefits.	<ul style="list-style-type: none"> • Letter of intent to establish residence in the state of Oklahoma • Certificate of Eligibility with entitlement and using Chapter 30 GI Bill (Active Duty) or Chapter 33 Post 9/11 GI Bill (Dependent Transfer of Entitlement) benefits • If spouse, a copy of marriage license • If a dependent, parent/guardian's most recent Federal Income Tax Return form 1040 or legal documentation of custody or guardianship
<input type="checkbox"/> J I have been, or am the dependent of an individual who has been discharged or released from a period of not fewer than ninety (90) days of active, uniformed service, less than five (5) years before the date of enrollment in the course(s) concerned, and Oklahoma is my home of record. I will not be using Chapter 30 or 33 benefits.	<ul style="list-style-type: none"> • Copy of DD Form 214 Certificate of Release or Discharge • If a dependent, parent/guardian's most recent Federal Income Tax Return form 1040 or legal documentation of custody or guardianship
<input type="checkbox"/> K I have been or am the dependent of an individual who has been discharged or released from a period of not fewer than ninety (90) days of active, uniformed service, regardless of my home of record, and I intend to use Chapter 30 or 33 benefits.	<ul style="list-style-type: none"> • Certificate of Eligibility with entitlement for Chapter 30 Montgomery GI Bill (Active Duty), Chapter 33 Post 9/11 GI Bill (Veteran) or Chapter 33 Post 9/11 GI Bill (Dependent Transfer of Entitlement) • Copy of DD Form 214 Certificate of Release or Discharge • Letter of intent to establish Oklahoma as state of residency • If a dependent, parent/guardian's most recent Federal Income Tax Return form 1040 or legal documentation of custody or guardianship
<input type="checkbox"/> L I am a recipient of The Marine Gunnery Sergeant John David Fry Scholarship and am using it as a GI Bill benefit.	<ul style="list-style-type: none"> • Certificate of Eligibility with entitlement for the Fry Scholarship • Letter of Intent to establish Oklahoma as state of residency
<input type="checkbox"/> M I am a recipient of Chapter 31, Vocational Rehabilitation with intent to establish residence in the state of Oklahoma as well as reside in the state while enrolled.	<ul style="list-style-type: none"> • Letter of intent to establish Oklahoma as state of residency • VA Form 28-1905
<input type="checkbox"/> N I am (or am the dependent of) a Military Reserve member that has been on full-time active status for more than thirty (30) days and Oklahoma is the home of record.	<ul style="list-style-type: none"> • Copy of enlistment document • Copy of Reserve member's current orders • Most recent Federal Income Tax Return form 1040
<input type="checkbox"/> O I am fully participating in or received a scholarship from the Air Force, Army, Navy, or Marines ROTC.	<ul style="list-style-type: none"> • Copy of scholarship and • Letter of verification from ROTC branch office
<input type="checkbox"/> P I am a current member of the Oklahoma National Guard	<ul style="list-style-type: none"> • Proof that one is currently an active member in the Oklahoma National Guard (copy of current orders or letter from one's Command verifying one is currently active in the Oklahoma National Guard)
<input type="checkbox"/> Q I am an independent person, have established a permanent domicile in Oklahoma for 12 months, and have documented intent to remain in Oklahoma after my education is completed.	<ul style="list-style-type: none"> • Most recent Federal Income Tax Return form 1040 • Proof of Oklahoma domicile (Oklahoma State Income Tax Return form 511; Oklahoma mortgage statement or lease agreement spanning at least 12 months) • Documentation that demonstrates convincing evidence to remain beyond completion of education (an example is a binding contract or scholarship for employment in-state 1-2 years after graduation)

SECTION 3 – HIGH SCHOOL INFORMATION

City, State, and Country of High School _____

Date of Graduation _____

SECTION 4 – GUARDIAN INFORMATION

Were you claimed as a dependent by a parent or legal guardian on tax returns filed last year? Yes No *(If no, skip to section 5)*

Parent/Legal Guardian Name(s) _____

Current Address (Street) _____

City, State, Zip _____

Years at this address _____

Permanent Address (Street) _____

City, State, Zip _____

Years at this address _____

Citizenship Status of Parent/Legal Guardian (Check One): U.S. Citizen Permanent Resident Foreign National Other _____

SECTION 5 – MARITAL STATUS

Are you married? Yes No *(If no, skip to section 6)*

Spouse's Full Name _____

How many years has your spouse lived in Oklahoma? _____

Citizenship Status of Parent/Legal Guardian (Check One): U.S. Citizen Permanent Resident Foreign National Other _____

Did your spouse attend high school in Oklahoma? Yes No

If yes, year of graduation _____

Is your spouse currently attending college in Oklahoma? Yes No

Is your spouse employed full-time in Oklahoma? Yes No

If yes, list employment information for past two years below.

SPOUSE'S EMPLOYMENT DATES		EMPLOYER NAME	CITY AND STATE	HOURS WORKED PER WEEK
FROM	TO			

SPOUSE'S EDUCATION		COLLEGE/UNIVERSITY	CITY AND STATE	TOTAL HOURS
FROM	TO			

SECTION 6 – EMPLOYMENT INFORMATION

List all of your employers for the past two years in chronological order.

EMPLOYMENT DATES		EMPLOYER NAME	CITY AND STATE	HOURS WORKED PER WEEK
FROM	TO			

SECTION 7 – DOMICILIARY INDICATORS

Questions in this section should be completed by the student if independent, or if dependent, by the parents or guardians.

Answering ‘Yes’ to any one or more of the following questions will not guarantee in-state residency for tuition purposes but will be taken into consideration with other sections of the petition.

- Are you registered to vote in Oklahoma? Yes No
- Do you own a motor vehicle registered in Oklahoma? Yes No
- Do you have a vehicle operator’s license for Oklahoma? Yes No
- Do you own residential real estate property in Oklahoma? Yes No
- Do you maintain a home in a state other than Oklahoma? Yes No

SECTION 8 – INTENT

- Did you move to Oklahoma primarily to attend school in Oklahoma? Yes No
- Did you move to Oklahoma primarily to work full-time, practice a profession on a full-time basis, or conduct business full-time? Yes No

SECTION 9 – SUPPORTING STATEMENT

Attach a TYPED statement describing why you believe in-state residency classification should be granted. Include any information not listed in this petition.

SECTION 10 – SIGNATURE

I hereby swear and affirm that the answers given in this petition are accurate and complete, and that all documents attached hereto are true and unaltered copies of the original documents requested. I understand that all documentation presented is subject to verification by the University. I further understand that in-state reclassification for an approved petition is not granted on a retroactive basis. If any circumstances change, affecting the tuition status requested by this petition, I agree to notify the University of Oklahoma Health Sciences Center in writing within 15 days of such change.

 Student’s Signature (First, Middle, Last)

 Date completed

ADMINISTRATIVE USE ONLY

Approved

Rationale

Denied

Officer Name

Date

OSHRE Policy Section