

2023-24 Appeal of Tuition Classification Application

All appeal decisions are effective in term following submission date of this residency appeal. Massachusetts law does not allow for retroactive action on appeals

Applicant Name	Student	D
Street Address	Date of Birth	
City State Zip Code		
Preferred phone	Email	@salemstate.edu

State residency (tuition classification) is determined at the point of admission to the university in accordance with rules set by the Commonwealth of Massachusetts. You can file this form to appeal your residency status if:

- a. You were previously admitted as an out of state student and you are now reentering the university after at least one year of withdrawal or a leave of absence, and during that year you resided in the Commonwealth of Massachusetts and you were financially independent.
- **b.** You are an out of state student and you can check off a status listed below to describe yourself; **if one of these does not apply to you then you are not eligible to appeal.**
 - Armed Service member, (or spouse or dependent) is stationed in state (DD214 or local orders required)
 - Education or financial support funded by the Commonwealth of Massachusetts
 - Job related relocation (letter of intent or commitment from employer required)
 - Graduated from a Massachusetts high school
 - Employee of the Massachusetts Higher Education System
 - Recipient of a Massachusetts National Guard Waiver
 - Refugee/Asylee Status or Deferred Action for Childhood Arrivals eligible (DACA)

Provide ALL of the following documents with your appeal:

- A typewritten narrative statement that explains your appeal circumstances and your reasons for moving to Massachusetts. This statement should provide clear and compelling reasons for your presence in the state and prove those reasons with corroborating documentation. You must also provide evidence of statements you have included in your narrative if you wish those statements to be considered.
- Proof of at least a full year of residency in a Massachusetts domicile that is adequate for your family size – provide a copy of a lease, purchase/sales agreement, or deed. A notarized statement from a landlord or property owner, clearly specifying your dates of occupancy, is also acceptable if accompanied by utility bills. Ownership in a summer or temporary residence does not qualify you for in-state residency.
- 3. A copy of your passport, MA driver's license or other state ID.
- 4. Copies of 2 years prior Federal AND State income tax forms for the student and, if dependent for financial aid purposes, for the parent or custodial parents or if married, the spouse. Note that any party who did not file taxes must provide an explanation; this will include the reason why no filing was required. If employed, please provide evidence of employment and earnings; if not employed provide a full explanation of how you were able to support yourself without income.

THIS IS PAGE 1 OF THIS FORM. PLEASE TURN IT OVER TO VIEW PAGE 2.

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Your complete appeal package may also include some of these items to fully document your claim. **Please place a checkmark beside the materials you have provided:**

- Evidence of marriage to a Massachusetts resident; you must prove at least one year of residency for your partner
- □ The DD214 serves as evidence of military service, relocation, or discharge for those who are either present in or absent from the Commonwealth due to military orders
- □ Copies of your I-94 Card, stamp from USCIS in passport, Green Card, diplomatic visa, I-797, both sides of your alien registration card or other appropriate evidence of legal status if you are documenting, asylum, refugee, and temporary protection or DACA status
- Evidence of enrollment in a Commonwealth human service or public assistance programs in addition to your evidence of domicile
- □ Evidence of permanent MA employment with sufficient earnings to be self-supporting
- □ Other exhibits such as high school diploma, automobile registration, utility bills, excise tax receipts, an operator's license or other licenses issued by the Commonwealth
- **D** Evidence of statements you have included in your narrative to strengthenyour case
- □ Other:

Please provide us with your signature as verification that you have affirm the following:

- I have read the residency appeal policy and completed page 1 and page 2 of the appeal form.
- I am providing you with all of the required documentation of my appeal.
- The information I have provided in this application is true and accurate.
- I am aware that my full university record will be used in evaluation of this appeal.
- If I am asked for additional materials, I will respond within 30 days if I wish to have further consideration.
- I understand that if I have concealed or misrepresented facts, this will be referred for disciplinary action which may include penalties up to dismissal, with no right of appeal or to a tuition refund.
- I can access the full text of the state policy governing tuition classification online at: <u>http://www.mass.edu/forstufam/admissions/residencypolicy.asp</u>

Applicant Signature and date

Parent/Guardian Signature and date (for applicant under 18)

Submit this form and attachments before the term begins to:

By mail:		
Residency Appeal Committee	In person:	2 nd Floor, Classroom Building, Central Campus
Student Navigation Center		
Salem State University	By Secure Fax:	978.542.6876
352 Lafayette Street	-	
Salem, MA 01970	By SSU Email:	navcenter@salemstate.edu