



NON-DEGREE STUDENT APPLICATION

THIS FORM IS FOR U.S. CITIZENS AND RESIDENT ALIENS ONLY. PLEASE COMPLETE EACH ITEM.

Return the completed form to: UWF, Office of Admissions, Building 18, Room 101, 11000 University Parkway, Pensacola, FL 32514-5750

1. Have you ever attended UWF? Yes No 2. U.S. Social Security Number: _____ - _____ - _____

3. Name: _____
Last Name Jr., III, etc. First Name Middle or Maiden Name

4. E-mail address: _____ 5. Gender: Female Male 6. Date of Birth: ____/____/____
month day year

7. Semester of enrollment? Fall 200__ Spring 200__ Summer 200__ 8. Area of study/interest: _____

9. Nation of Citizenship: _____

10. If citizenship is not U.S., complete the following: City and Country of Birth _____

What VISA do you presently hold? J1 J2 None Other _____ I-94 Expiration Date: ____/____/____
month day year

For what VISA are you applying? J1 J2 None Other _____

If a permanent immigrant, enter the alien registration number shown on your I-551 form _____ AND
you must provide a front/back photocopy of your Resident Alien card.

11. Ethnic origin, check one (requested in compliance with Title VI of the Civil Rights Act of 1964):

White (not Hispanic origin) Black (not Hispanic origin) Hispanic Asian or Pacific Islander American Indian or Native American

12. Enter your permanent address. All correspondence will be mailed to this address:

Street/PO Number City County State Zip
(____) _____ - _____ (____) _____ - _____ (____) _____ - _____
Home Phone Number Business Phone Number Cell Phone Number

13. In case of emergency, indicate the person the University should contact:

Last Name First Name Middle Initial

Street/PO Number City County State Zip
(____) _____ - _____ (____) _____ - _____ (____) _____ - _____
Home Phone Number Business Phone Number Cell Phone Number

14. **REQUIRED:** List how you have spent, or plan to spend, the two years prior to attending UWF (e.g., education, employment, military service, etc.):

Institution/Employer/Other City, State/Nation Beginning Date Ending Date

15. If your answer to any of the following is yes, you must submit a full statement of relevant facts on a separate sheet attached to this form. You may be required to furnish UWF with copies of all official documentation explaining the final disposition of the proceedings.

- A. Yes No Are you currently, or have you ever been, charged with or subject to disciplinary action for scholastic or any other type of misconduct at any educational institution?
- B. Yes No Have you ever been charged with a violation of the law which resulted in, or, if still pending, could result in, probation, community service, a jail sentence, the revocation or suspension of your driver license (including traffic violations which resulted in a fine of \$200 or more)?

If your records have been expunged pursuant to applicable law, you are not required to answer yes to these questions. If you are unsure whether you should answer yes to 15A or 15B, we strongly suggest that you answer yes and fully disclose all incidents. By doing so, you can avoid any risk of disciplinary action or revocation of your registration.

I HAVE READ AND UNDERSTAND THE CONDITIONS OF THE NON-DEGREE STUDENT CLASSIFICATION:

Student's Signature: _____ Date: _____

INFORMATION FOR RESIDENCY CLASSIFICATION

A Florida "resident for tuition purposes" is a person who has, or a dependent person whose parent or legal guardian has, established and maintained legal residence in Florida for at least twelve months. Residence in Florida must be as a bona fide domicile rather than for the purpose of maintaining a residence incident to enrollment at an institution of higher education. To qualify as a Florida resident for tuition purposes you must be a U.S. Citizen, permanent resident alien, or legal alien granted indefinite stay by the Immigration and Naturalization Service. Other persons not meeting the twelve-month legal residence requirement may be classified as Florida residents for tuition purposes only if they fall within one of the limited special categories authorized by the Florida Legislature and Board of Regents. All other persons are ineligible for classification as a Florida "resident for tuition purposes". Living in or attending school in Florida will not, in itself, establish legal residence. Students who depend on out-of-state parents for support are presumed to be legal residents of the same state as their parents.

NON-FLORIDA RESIDENTS

I understand that I do not qualify as a Florida resident for tuition purposes for the term for which this application is submitted and that if I should qualify for some future term, it will be necessary for me to file the required documentation prior to the beginning of the term in order to be considered for Florida residency classification.

Signature _____ Date _____

FLORIDA RESIDENT FOR TUITION PURPOSES STATEMENT

*This section **must** be completed in **full** if you claim Florida residency for tuition purposes.*

ATTACH COPIES (IF ANY) OF DOCUMENTATION REQUIRED

- ◆ A notarized copy of your and/or your parents' most recent tax return or other documentation may be requested to establish dependence/independence.
Dependent: a person for whom 50% or more of his/her support is provided by another.
Independent: a person who provides 50% or more of his/her own support.
- ◆ A copy of marriage certificate is required in all cases of spouse claiming partner's residency.
 - ___ A. I am an **Independent** person and have maintained legal residence in Florida for at least 12 months.
 - ___ B. I am a **dependent** person and my parent or legal guardian has maintained legal residence in Florida for at least 12 months. (**Required:** copy of most recent tax return on which you were claimed as a dependent or other proof of dependency.)
 - ___ C. I am a **dependent** person who has resided for five years with an adult relative other than my parent or legal guardian, and my relative has maintained legal residence in Florida for at least 12 months. (**Required:** copy of most recent tax return on which you were claimed as a dependent or other proof of dependency.)
 - ___ D. I am **married** to a person who has maintained legal residence in Florida for at least 12 months. I have now established legal residence and intend to make Florida my permanent home. (**Required:** copy of Marriage Certificate, and other supporting documentation for residency.)
 - ___ E. I was previously enrolled at a Florida state institution and classified as a Florida resident for tuition purposes. I abandoned my Florida domicile less than 12 months ago and am now re-establishing Florida legal residence.
 - ___ F. According to the United States Immigration and Naturalization Service, I am a **permanent resident alien** or other legal alien granted indefinite stay and have maintained a domicile in Florida for at least twelve months. (**Required:** INS documentation and proof of residency status).
 - ___ G. I am a **member of the armed services** of the United States and I am stationed in Florida on active military duty pursuant to military orders, or whose state of legal residence is Florida, or I am a member's spouse or dependent child. (**Required:** copy of military orders or DD2058 showing state of legal residence.)
 - ___ H. I am a full-time instructional or administrative employee **employed by a Florida public school, community college or institution** of higher education, or I am the **employee's spouse or dependent child**. (**Required:** copy of employment verification.)
 - ___ I. I am part of the **Latin American/Caribbean scholarship program**. (**Required:** copy of scholarship papers.)
 - ___ J. I am a qualified beneficiary under the terms of the **Florida Pre-Paid Post-secondary Expense Program**, S.240.551,F.S. (**Required:** copy of card.)
 - ___ K. I am living on the Isthmus of Panama and have completed 12 consecutive months of college work at the F.S.U. Panama Canal Branch, or I am the student's spouse or dependent child. (**Required:** copy of marriage certificate or proof of dependency.)
 - ___ L. I am a **Southern Regional Education Board's Academic Common Market graduate student**. (**Required:** certification letter from State Coordinator.)
 - ___ M. I am a full-time **employee of a state agency** or political subdivision of the state whose student fees are paid by the state agency or political subdivision for the purpose of job-related law enforcement or corrections training.
 - ___ N. I am a **McKnight Fellowship** recipient. (**Required:** verification from graduate studies.)
 - ___ O. I am an active member of Florida National Guard who qualifies under s250.10(7) and (8) for the tuition assistance program.
 - ___ P. I am an active duty member (or the spouse/dependent child of the member) of the Armed Services of the United States attending a public community college or university within 50 miles of the military establishment where the member is stationed, if such military establishment is within a county contiguous to Florida.
 - ___ Q. I am an active duty member (or the spouse or dependent child of the member) of the Canadian military residing or stationed in this state under the North American Air Defense (NORAD) agreement, attending a public community college or university within 50 miles of the military establishment where the active duty member is stationed.
 - ___ R. I am a U.S. Citizen living outside the U.S. who is teaching at a Department of Defense Dependent School or in an American International School and who has enrolled in a graduate level education program which leads to a Florida teaching certificate.
 - ___ S. I am an active duty member (or spouse/dependent child of the member) of a foreign nation's military who is serving as a liaison officer. I am residing or stationed in Florida and attending a community college or state university within 50 miles of the military establishment where I am stationed.

PERSON CLAIMING RESIDENCY SHOULD COMPLETE THIS SECTION IN FULL

- ◆ Documents supporting the establishment of legal residence must be dated, issued, or filed **12 months before the first day of classes** of the term for which a Florida resident classification is sought. All documentation is subject to verification.
- ◆ **Additional documentation** other than what is required above may be requested in some cases.

PLEASE PRINT.

1. Name of Student: _____ 2. Student Social Security: _____/_____/_____
3. Name of person claiming Florida residency: _____ 4. Claimant's relationship to student: _____
5. Claimant's permanent legal address: _____ 6. Claimant's Telephone Number: (____) _____

- Street/PO Number _____ Apt. No. _____ City _____ State _____ Zip code _____
7. Date claimant began establishing legal Florida residence and domicile: _____/_____/_____
8. Claimant's **voter registration**, State: _____ Number: _____ County: _____ Original Issue date: _____/_____/_____
9. Claimant's **driver's license**, State: _____ Number: _____ Original Issue date: _____/_____/_____
10. Claimant's **vehicle registration**, State: _____ Tag Number: _____ Original Issue date: _____/_____/_____
11. **Non-U.S. Citizen only.** Resident Alien Number: _____ Original Issue date: _____/_____/_____

(Copy of both sides of card required.)

I do hereby swear or affirm that the above named student meets all requirements indicted in the checked category above for classification as a Florida resident for tuition purposes. I understand that a false statement in this affidavit will subject me to penalties for making a false statement pursuant to **837.06**, Florida Statutes, and to Board of Education Rule 6C-6.001(6).F.A.C.

Signature of person claiming Florida residency (as listed in Item #3 above) _____

Date _____

3/07