



DELGADO COMMUNITY COLLEGE
APPLICATION FOR NON-LOUISIANA RESIDENCY RECLASSIFICATION

NAME: (Last) (First) (Maiden or Middle)

STUDENT ID NUMBER: GENDER: (Male) (Female)

PHONE NUMBER:

DESIRED SEMESTER/YEAR OF RESIDENT STATUS:

LAST SEMESTER and YEAR AT DELGADO COMMUNITY COLLEGE:

- () FALL 20
() SPRING 20
() SUMMER 20

- () FALL () NEVER ATTENDED
() SPRING
() SUMMER

Based on the information you provided on your admission application, you have been coded as non-Louisiana resident for tuition purposes. Delgado Community College adheres to the guidelines established by the Louisiana Community and Technical College System (LCTCS).

For tuition purposes, a Louisiana resident is defined as one who has, or a dependent person whose parent or legal guardian has, abandoned all prior domiciles and has been domiciled and is employed full-time in the State of Louisiana continuously for at least one full year (365 days) immediately preceding the first day of classes of the semester of enrollment for which resident classification is sought. Other persons not meeting the 12-month legal residency requirement as defined by the LCTCS may be classified as temporary residents for tuition purposes only if they meet the requirements as listed on the temporary re-classification application.

To qualify as Louisiana resident for tuition purposes, you must be a U.S. citizen, a legal permanent resident, a non-U.S. citizen who can demonstrate that he or she has been lawfully admitted to the United States for permanent residence; or meet one of the classifications of temporary resident as defined by the LCTCS. Owning property in Louisiana, paying Louisiana state taxes, or establishing voter privileges in Louisiana do not, in themselves, qualify you for Louisiana residency.

It is recommended that applications for reclassification to resident status be filed at least 21 calendar days before registration to allow changes to be reflected on registration material. Applicants filing immediately prior to registration or up to 21 calendar days after the first day of classes must be prepared to pay the non-resident fee and wait for a refund if the application is approved. Such applicants shall include any information or documents required by the College, together with any supporting evidence which the student desires to submit. Failure to comply with the appeal procedures and deadlines shall constitute a waiver of all claims for reclassification for the applicable term or terms. It is recommended that you keep a copy of this application and accompanying documents for your records.

Attach copies of the following general supporting documents to this application: any of the documents listed below that you possess, the signed Verification of Louisiana Employment form (included), and the personal statement requested in question #16.

PLEASE NOTE: Lease agreements, utility bills, W-2 forms do not constitute verification of residency status.

- Louisiana driver's license or I.D. (for at least one year)
Louisiana vehicle registration (for at least one year)
Louisiana voter's registration (for at least one year)
Louisiana marriage certificate
Louisiana tax document from the past year (if submitted electronically, submit IT540B SD form, if mailed, must include IRS stamp)
Louisiana homestead exemption
License for professional practice in Louisiana (for at least one year)

AN APPLICATION WILL NOT BE CONSIDERED IF RECEIVED MORE THAN 21 DAYS AFTER THE FIRST DAY OF CLASSES

(For Office Use Only)
CLASSIFICATION ASSIGNED BY CAMPUS
RESIDENT EFFECTIVE: () FALL 20 () SPRING 20 () SUMMER 20
NON RESIDENT
Approved by: Date:
Date appeal forwarded to System Residence Appeals Committee:

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- 1. Date of Birth: _____ Place of Birth: _____
2. If not a U.S. Citizen, date permanent card received: _____
3. Permanent Address:
Street: _____ (Apt. No)
City: _____
State: _____ (Zip Code)
Date moved to Louisiana: Month: _____ Day: _____ Year: _____

4. List all of your addresses for the past five years. Account for all time periods of two weeks or longer

Table with 4 columns: Street Address, City, State, Dates: From - To. Contains 5 empty rows for address entry.

My application for Non-Louisiana Residency Reclassification is based on one of the following:

The burden of proof rests with you, the student, to establish Louisiana residency. A minimum of two different documents are required (in certain instances a third document). Primary requirements are listed below. Secondary requirements are listed under the General Supporting Documentation section.

Check one of the following that applies to you.

- checkbox I have lived and worked in Louisiana for the last 12 months. Employer must complete the attached employee verification form.
checkbox I am married to a Louisiana resident as defined by the LCTCS definition. Attach a copy of marriage certificate, along with a copy of spouses employee verification form.
checkbox I am dependent child (Internal Revenue Code of 1954, section 152) of a graduate of Delgado Community College. Attach the name of graduate, date of graduation, along with a signed/certified copy of parent's prior Louisiana tax document with you listed as dependent.
checkbox I am a dependent child (Internal 1954, section 152) of a Louisiana resident as defined by LCTCS definition. Attach a signed/certified copy of parent's prior Louisiana tax document with you listed as a dependent, along with a copy of a parent's employee verification form.
checkbox I am a dependent child living with a legal guardian who is a Louisiana resident as defined by the LCTCS definition. Attach copy of legal documents along with a copy of my parent's employee verification form.
checkbox I am now separated from the armed forces. I met the Louisiana residency requirements under these regulations immediately prior to entering the armed forces. I have resided continuously for a period less than two years in another state or foreign country. Attach a copy of your current DD-214 indicating Louisiana as your home state.
checkbox According to the United States Citizenship and Immigration Services (USCIS), I am a permanent resident and I meet the Louisiana resident definition as defined by the LCTCS. Attach a copy of permanent resident card or For I-551 employee verification form.

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5. Were you claimed as a dependent on any person's or State Income Tax return the past years?
Yes No

If yes, complete the following:
(Name of person claiming you as a dependent & relationship)

(Street Address) (City) (State) (Zip Code)

6. Dependent child of Alumni: Yes No

7. Have you filed a Louisiana Tax return? Yes No

If yes, for which year:

8. Do you have a driver's license? Yes No If yes, what is the state of issue?

If Louisiana driver's license, please enclose a photocopy

9. Do you own a car? Yes No

If yes, in what state is it registered? If registered in Louisiana, please enclose a copy?

10. Are you registered to vote in Louisiana: Yes No

If yes, enclose a photocopy of your voter registration card.

11. List all agencies or persons by whom you have been employed during the past five years (list present employer first):

Table with 3 columns: Employer, City and State, Dates employed: From - To

12. List all schools attended from present date starting with Delgado Community College, ending with High School:

Table with 3 columns: School, City and State, Dates Attended: From - To

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13. List all financial support (any unearned income) received during the past five years (include gifts, grants, loans, scholarships, social security, disability, retirement, etc.):

Table with 4 columns: Year Source of Support, Relationship to You, Address of Donor, Amt./Percent

14. Do you own property in Louisiana: Yes No

If yes, list location:

15. If married, give name of spouse:

Date of marriage: Spouse's Occupation:

Spouse's employer and address:

16.

On a separate sheet of paper make a complete statement covering:
(1) Your reasons for coming or returning to Louisiana.
(2) Your reasons for believing you are a domiciliary of Louisiana.
(3) Any further facts relative to your resident status you wish to submit.
Please take some time to write your statement as this is an important part of your application.

17. Signature: (this form will not be accepted if not signed and dated)

I hereby certify that the information given in this application and in all attachments thereto is true, correct and complete to the best of my knowledge. I authorize the Louisiana Community and Technical College System to verify all facts relevant to my claim for residency.

Signature of applicant Date

If applicable, Signature of Guardian Date

Applicants must complete all items and provide all supplemental documentation requested by this office. Failure to do so may result in the application being returned, thus delaying consideration.

AN INCOMPLETE APPLICATION WILL NOT BE CONSIDERED UNDER ANY CIRCUMSTANCES

EMPLOYEE VERIFICATION FORM

VERIFICATION OF LOUISIANA EMPLOYMENT FOR RESIDENCY DETERMINATION

Name of Student:

Last	First	Middle or Maiden
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Completed by (if different than student): () Applicant () Parent () Spouse

Name:

Last	First	Middle or Maiden
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Phone Number: _____ Student's College Wide ID # _____

This is to certify that I have been an employee of: (completed by employer)

Name of Agency: _____ Phone Number: _____

Agency address:

From: _____ To: _____
Month/Day/Year Month/Day/Year

Employee worked an average of _____ hours per week.

If transferred to Louisiana, indicate date of transfer: _____

This is to certify that the information shown above concerning the employment of

_____ **is accurate.**

Name of Employee

Signature of Employer

Agency

Print Name of Employer

Date

Title