



NEW YORK STATE RESIDENCY APPLICATION

*If you have graduated from a NYS high school within the last 5 years, do not complete this application. (Submit transcripts and diploma showing date of graduation directly to the office of Admissions)

Copies of all the following documentation must be submitted with application:

Lease/proof of home ownership, and New York State ID, and Federal income tax return (1040 form), and New York State income tax return (IT201 or IT203 form), and W2s

Section A- All information in Section A must be completed.

Name:			Address:		
Last	First	MI	Street		
Email: _____			City State Zip		
SSN: _____		Phone: () _____	County: _____		
Length of time at this address _____			If less than three years, list prior addresses below		
Years/Months					
(required: attach lease/ proof of home ownership)					
From	To	Street	City	State	

Age _____	Date of Birth _____	Marital Status _____	US Citizen? _____	Y/N	
(Non-US Citizens)					
List your permanent resident number or visa type _____				Date issued _____	
(required for non-US citizens: attach permanent resident card or visa)					
Are you a first-time SUNY student? _____		Are you a graduate or undergraduate student? _____			
Y/N					
Have you ever received a New York State award? (TAP, Regents Scholarship, Empire state fellowship etc.) _____					
Y/N					
Have you had or will you be applying for a Stafford Loan? (formerly the Guaranteed Student Loan) _____					
Y/N					
Do you have a driver's license or state ID? _____		If yes, in what state was your license issued? _____			
Y/N		(required: attach NY state ID)			
Do you own a car? _____		If yes, in what state is your car registered? _____			
Y/N		(optional: attach vehicle registration)			
Are you a registered voter? _____		If yes, in what state are you registered? _____			
Y/N		(optional: attach voter registration)			
In what state did you file resident taxes for 2021? _____			Where will you file for 2022? _____		
(required: attach federal (1040 form) and state (IT201 or IT203 form) income tax returns and W2s)					

Incomplete applications will delay processing



Student Budget Form

Administrative Office of the Bursar Phone: 212-217-3720 Fax: 212-217-3721

Complete this form only if you are an independent student under 24 years old.

_____ @ _____
Last Name, First Name Student ID

Check appropriate box:

- I have my own apartment
- I share an apartment
- I live with a parent or other relative

Please itemize your expenses and income for the previous 12 months:

EXPENSES PER YEAR

Rent/Mortgage	\$ _____
Utilities	\$ _____
Food	\$ _____
Transportation	\$ _____
Personal	\$ _____
Tuition	\$ _____
Educational Supplies	\$ _____
Other (explain below)	\$ _____
TOTAL	\$ _____

RESOURCES PER YEAR

Earnings	\$ _____
Financial Aid	\$ _____
Other Income (Please explain below)	\$ _____
TOTAL	\$ _____

Please use this section to explain any unusual circumstances:

Attach appropriate documentation to back up your financial independence.

Signature _____ Date _____



ALTERNATE LEASE STATEMENT

Name of the Student _____ Semester _____
Last First MI

Student ID # _____ Phone # (____) _____

Address _____ Apt # _____

City _____ State _____ Zip Code _____

E-Mail _____

I lived at the above address from _____ to _____ but the lease is NOT in my name.
Month/Day/Year Month/Day/Year

TO BE COMPLETED BY THE PERSON WHOSE NAME APPEARS ON THE LEASE OR CONTRACT

I _____ certify that I reside at the address indicated above and
Owner/Lease Name

_____ has resided with me from _____ to _____.
Student's Name Month/Day/Year Month/Day/Year

Proof that I have resided at the above address for one year is attached (e.g. lease, telephone bill, utility bill, apartment or house insurance, mortgage statement).

Signed _____ Date _____

NOTARIZED

Sworn before me this _____ day of the month of _____, 20_____

Notary Public

I certify that the above information is accurate and complete. I understand that this information may affect my residency status at the college.

I understand that if I provide false information or withhold relevant information in order to obtain resident status, Fashion Institute of Technology may revoke its determination of in-state residency, and that I will owe non-resident tuition for each semester or session that I have attended under these circumstances. I also understand that I may be subject to disciplinary action.

Signed _____ Date _____

NOTARIZED

Sworn before me this _____ day of the month of _____, 20_____

Notary Public