In Arizona, as in all other states, tuition at the State’s publicly-supported universities is lower for in-state resident students than for out-of-state non-resident students. This reflects the fact that state universities are supported financially by the state’s taxpayers. The universities’ rules for determining classification or reclassification as a resident or non-resident for tuition purposes reflect Arizona law and Arizona Board of Regents (“ABOR”) policy. At the time of their admission, Northern Arizona University classifies all students as either a resident or non-resident. Students must be admitted and properly registered for classes using the tuition classification initially determined by the University prior to petitioning for residency reclassification for that term.

In accordance with Arizona law (A.R.S. §15-1803) and ABOR Policy 4-102, aliens who meet the requirements of A.R.S. §15-1803 are eligible for in-state tuition.

**Deadlines** – Term specific deadlines can be found at [https://in.nau.edu/student-service-center/arizona-residency/forms-deadlines/](https://in.nau.edu/student-service-center/arizona-residency/forms-deadlines/)

- The deadline to request reclassification is the Last Day of Registration. Students who fail to submit a petition or affidavit within the allowable timeframe waive their right to gain reclassification as an in-state resident for that semester, term, or session.
- Processing time for petitions is twenty (20) business days. If additional information is needed the process may be delayed.
- No extensions of payment deadlines are granted on the basis of unresolved residency status or pending petitions. A refund of fees will be issued, if necessary, upon approval of resident status.

Last Day of Registration: the final day of regular registration for credit for a semester, term, or session (as applicable) as published by the Office of the Registrar or as determined by the Director of the Student Service Center.

**Appealing a Denial**

In accordance with ABOR Policy 4-205 and as outlined in the Residency Reclassification Procedure, if an individual believes they have met the requirements to be classified as an in-state resident for tuition purposes and has been denied such classification, they may appeal their non-resident classification by submitting a Non-Resident Classification Notice of Appeal to the Student Service Center by the relevant deadlines published on its website. In no event will the University accept residency classification appeals later than thirty-five (35) calendar days from the applicable Last Day of Registration. Failure to file a completed and signed notice of appeal within the allowable timeframe shall constitute a waiver of the individual’s right to appeal their residency classification for that term.

**Student Athletes**

If you are a Student Athlete, currently classified as Non-Resident or WUE, and receiving any scholarship funds from the Athletics Department, you must speak with the Athletics Compliance Officer before submitting this petition.

Becoming a Resident for tuition purposes could negatively impact your Athletics Scholarship.
Instructions
Respond to all questions and statements and provide copies (no originals, these documents will not be returned to you) of all documentation required. Failure to do so will delay processing of this petition and may be interpreted as evidence of non-residency.

Falsification: Any student found to have intentionally made a false or misleading statement or to have deliberately submitted false or misleading information or materials concerning a petition for residency classification for tuition purposes with the intent to deceive is subject to dismissal from the University and will be held responsible for the payment of any tuition amounts that would have been charged but for the false or misleading statement.

Student/Applicant Information

NAU ID #______________________________  □ Undergraduate  □ Graduate

☑ Fall  ☐ Spring  Year _______  (Residency does not affect tuition for Summer or Winter terms)

Full Legal Name_________________________________________  E-mail Address ___________________________  Phone __________________

Complete Mailing Address ______________________________________________________________

Street  City  State  Zip

Date of Birth______________  Place of Birth _____________  Date/Location of HS Graduation _______________________

Domicile Information – complete both columns

<table>
<thead>
<tr>
<th>INFORMATION ON STUDENT</th>
<th>INFORMATION ON SPOUSE</th>
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<tbody>
<tr>
<td>NAME</td>
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<tr>
<td>CURRENT ADDRESS</td>
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<tr>
<td>PERMANENT ADDRESS</td>
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<td>EMPLOYED?</td>
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<td>(full-time, part-time, retired)</td>
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<tr>
<td>EMPLOYER’S NAME AND ADDRESS</td>
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<td>YOUR HOME OCCATION</td>
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<td>(own, lease, rent?)</td>
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<tr>
<td>BANKS</td>
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<tr>
<td>(checking and savings)</td>
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<tr>
<td>STATE TAX (state where you filed resident state tax for the past year)</td>
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<tr>
<td>FEDERAL TAX (address listed on your federal tax form for the past year)</td>
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<tr>
<td>VOTER REGISTRATION (date and state of most recent)</td>
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<tr>
<td>ARIZONA DRIVER’S LICENSE (date issued &amp; number issued)</td>
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</tr>
<tr>
<td>ARIZONA VEHICLE REGISTRATION (date registered and number)</td>
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Spouse Arizona Domicile Affidavit

**Spouse and Student Certification**

I, ____________________________, certify that ____________________________

(Spouse, printed) (Student, printed)

is eligible to be claimed as an exemption for state and federal tax purposes as of the date of enrollment for the term which this application is intended. I further certify that I have been domiciled in Arizona for at least 12 consecutive months prior to the term. I further certify that all statements, information, and evidence presented are true and complete. I understand that if I am found to have made a false or misleading statement concerning domicile or tuition status, the student will be subject to dismissal from the university and be held responsible for the payment of any tuition amounts that would have been charged but for the false or misleading statement (ABOR 4-208B). I hereby grant permission for NAU representatives to verify any supporting evidence submitted with this waiver, petition, or affidavit.

Signature of Spouse (sign in the presence of Notary Public)

Signature of Student (sign in the presence of Notary Public)

Signature of Notary Public

Subscribed and sworn before me on this _____day of ______________, 20__.

State of __________________________County of __________________________

Notary Name (print) __________________________ (Notary Seal)

Notary Signature __________________________ my commission expires: ______________
# REQUIRED DOCUMENTATION

Documents will be evaluated solely by the University’s residency classification officer or Residency Classification Appeal Committee, who may consider any relevant evidence, including but not limited to, the information or material described below. No one factor is determinative.

Please check the appropriate box, Provided or Not Provided, for all items.

<table>
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<tr>
<th>Provided</th>
<th>Not Provided</th>
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</table>

### Evidence that the Student has established domicile in Arizona

- Student’s Arizona driver’s license OR learner’s permit OR state ID card
- Student’s Arizona voter registration card OR permanent resident card OR eligible visa
- Student’s Arizona vehicle registrations for all vehicles operated in Arizona

### Evidence that Spouse established 12 months domicile in Arizona

Evidence must exist at the beginning of and be maintained throughout the 12 month period of continuous presence needed to establish residency classification. Acts or events occurring less than 12 months before the last day of class registration in the term of application may be considered as evidence of the lack of such intent.

- Spouse’s Arizona driver’s license
- Spouse’s Arizona voter registration card OR permanent resident card OR eligible visa
- Spouse’s Arizona vehicle registrations for all vehicles operated in Arizona
- Spouse’s current Mortgage Deed or Lease
- Spouse’s complete bank statements that show detailed transaction history for 12 consecutive months prior to term. (This must be statements from your primary account, meaning the account on which you make your day-to-day purchases. This can be a checking, savings, or credit account)
- Spouse’s most recent filed Arizona state tax return (form 140)

### Evidence of Spouse’s financial independence

- Spouse’s most recent paystub with year-to-date earnings and withholdings
- Spouse’s most recent filed Federal tax returns (Form 1040, first 2 pages only)
- Spouse’s tuition costs for all institutions attended in last year, if applicable
- Spouse’s financial aid received for all institutions attended in last year, if applicable
- Spouse’s Parent Affidavit & Spouse’s Parent’s federal tax returns for last 2 years (if under 24 yrs of age or younger & married less than 2 yrs)
- Statements from trust account(s) for Student and Spouse for last 12 months, if applicable

### Evidence that Spouse is entitled to claim Student as dependent for federal and state tax purposes

- Government issued marriage certificate

### Missing Documentation Explanation

Explain in the space below why you are missing any documentation that is required. Attach a separate page if needed.

### Additional Information

Explain in the space below any additional information that would support your petition. Attach a separate page if needed.
RESIDENCY RECLASSIFICATION
SPOUSE ARIZONA DOMICILE AFFIDAVIT

Parent/Guardian(s) Affidavit, if applicable

If the student is 24 years of age or younger and married for less than 2 yrs, the spouses’ parents must complete the affidavit below

- REQUIRED if you are 24 years of age or younger and not married.
- REQUIRED if you are 24 years of age or younger and married LESS than 2 yrs.
- If parents are not married, or are divorced, the affidavit must be copied and completed by **both** parents individually.
- Both parents must submit either jointly filed or individually completed and filed Federal Tax Returns – pages 1 and 2 only of form IRS 1040 or a complete IRS Tax Transcript for the most recent two 2 years.

| Did you or will you claim the applicant as an exemption for Federal income tax purposes 2 yrs prior to Term of Petition? | ❑ Yes ❑ No |
| Did you or will you claim the applicant as an exemption for Federal income tax purposes 1 yr prior to Term of Petition? | ❑ Yes ❑ No |
| Did you provide any financial support for the applicant/student 2 yrs prior to Term of Petition? | ❑ Yes ❑ No |
| Did you provide any financial support for the applicant/student 1 yr prior to Term of Petition? | ❑ Yes ❑ No |
| Did you provide health insurance coverage for the applicant/student 2 yrs prior to Term of Petition? | ❑ Yes ❑ No |
| Did you provide health insurance coverage for the applicant/student 1 yr prior to Term of Petition? | ❑ Yes ❑ No |
| Did you provide auto insurance coverage for the applicant/student 2 yrs prior to Term of Petition? | ❑ Yes ❑ No |
| Did you provide auto insurance coverage for the applicant/student 1 yr prior to Term of Petition? | ❑ Yes ❑ No |

**Parent Certification**

I/We, the Parent/Guardian(s), certify that all statements, information, and evidence presented are true and complete. I/We understand that if am found to have made a false or misleading statement concerning domicile or tuition status, the Student will be subject to dismissal from the university and be held responsible for the payment of any tuition amounts that would have been charged but for the false or misleading statement (ABOR 4-208B). I/We hereby grant permission for NAU representatives to verify any supporting evidence submitted with this waiver, petition, or affidavit.

If parents are divorced, the affidavit must be copied and completed by **both** parents individually.

Must be signed in the witness of a Notary Public.

Parent 1 Name  Parent 2 Name

Signature of Parent 1 Date  Signature of Parent 2 Date

Subscribed and sworn before me on this _____day of ______________, 20__.  
State of __________________________County of ______________________  
Notary Name (print) ____________________________  (Notary Seal)

Notary Signature ______________________________________  my commission expires: ____________