



**Admissions & Records Office**  
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 Web: [www.CraftonHills.edu](http://www.CraftonHills.edu)

# Crafton Hills College Supplemental Residency Questionnaire

Students may be required to complete a supplemental residency questionnaire to clarify residency or apply for a residency reclassification. Residency changes are not automatic. **Residency will not be changed once the semester has begun or two weeks from the date the application for admissions was submitted for the term, whichever is later.**

To be considered for **California** residency, you must:

1. Be physically present in California for at least **one year and one day** prior to the start of the semester.
2. Show documentation of intent to establish California residency dating at least **one year and one day** prior to the start of the semester.
3. Not be precluded from establishing residency by provisions of the Immigration and Nationality Act.

## PART A – TO BE COMPLETED BY ALL STUDENTS

Semester Reclassification requested for (check only one):  Spring  Summer  Fall Year: 20\_\_\_\_\_

Print Full  
 Legal Name: \_\_\_\_\_ Student ID # \_\_\_\_\_  
Last First Middle 7-Digit SBCCD ID #

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Physical Address: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_

E-Mail Address: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_

Are you a United States citizen?  Yes  No Other Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_

When did your present stay in California begin? \_\_\_\_/\_\_\_\_/\_\_\_\_

**Have you lived at your current physical address continuously for the last two years?**  Yes  No

*If you answered "NO," list your previous addresses for the past two years (in descending order):*

No.	Street	City	State	Zip Code	Start Mo/Yr	End Mo/Yr
_____	_____	_____	_____	_____	____/____/____	____/____/____
_____	_____	_____	_____	_____	____/____/____	____/____/____
_____	_____	_____	_____	_____	____/____/____	____/____/____
_____	_____	_____	_____	_____	____/____/____	____/____/____

**In The Last Year, Have You:**

- Registered to vote or voted in a state other than California?  Yes  No  
 Petitioned for a divorce as a resident of another state?  Yes  No  
 Attended an out-of-state institution as a resident of that state?  Yes  No  
 Declared non-residence for California income tax purposes?  Yes  No

*If you answered "Yes" to any of the questions above, please give a brief explanation:*

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**PART B – TO BE COMPLETED BY ALL STUDENTS UNDER 19 YEARS OF AGE**

1. (a) Mother's Name: \_\_\_\_\_
- (b) Is your mother living?     Yes     No    If "No," Date Deceased: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 If answer to (b) was "Yes," answer the following:
- (c) Is your mother a United States citizen?     Yes     No    If "No," what is her immigration status? \_\_\_\_\_
- (d) Mother's Permanent Address: \_\_\_\_\_ (e) If in California, for how long? \_\_\_\_\_
- (f) **Has your mother lived at her current address continuously for the last two years?**     Yes     No
- (g) *If the answer to (f) was "No," list your mother's previous addresses for the past two years (in descending order):*

No.	Street	City	State	Zip Code	Start Mo/Yr	-	End Mo/Yr
No.	Street	City	State	Zip Code	Start Mo/Yr	-	End Mo/Yr

- (h) **In The Last Year, Has Your Mother:**
- Registered to vote or voted in a state other than California? . . . . .  Yes     No
- Petitioned for a divorce as a resident of another state? . . . . .  Yes     No
- Attended an out-of-state institution as a resident of that state? . . . . .  Yes     No
- Declared non-residence for California income tax purposes? . . . . .  Yes     No

2. (a) Father's Name: \_\_\_\_\_
- (b) Is your father living?     Yes     No    If "No," Date Deceased: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 If answer to (b) was "Yes," answer the following:
- (c) Is your father a United States citizen?     Yes     No    If "No," what is his immigration status? \_\_\_\_\_
- (d) Father's Permanent Address: \_\_\_\_\_ (e) If in California, for how long? \_\_\_\_\_
- (f) **Has your father lived at his current address continuously for the last two years?**     Yes     No
- (g) *If the answer to (f) was "No," list your father's previous addresses for the past two years (in descending order):*

No.	Street	City	State	Zip Code	Start Mo/Yr	-	End Mo/Yr
No.	Street	City	State	Zip Code	Start Mo/Yr	-	End Mo/Yr

- (h) **In The Last Year, Has Your Father:**
- Registered to vote or voted in a state other than California? . . . . .  Yes     No
- Petitioned for a divorce as a resident of another state? . . . . .  Yes     No
- Attended an out-of-state institution as a resident of that state? . . . . .  Yes     No
- Declared non-residence for California income tax purposes? . . . . .  Yes     No

3. (a) Where do you live?     With Mother     With Father     Somewhere Else
- (b) If you do not live with either parent, are you under continuous and direct care and control of any person or persons other than a parent?     Yes     No
- If "Yes," give the name and address of such person:
- Name: \_\_\_\_\_

No.	Street	City	State	Zip Code

How long have you been continuously under this person's direct care and control? \_\_\_\_\_

**You must bring at least three (3) items documenting your parent's or guardian's California residency. The documentation items must be valid, legible, and cover the one year and one day period before the first day of the semester. See part E for a list of acceptable documents.**

**PART C – TO BE COMPLETED BY ALL STUDENTS WHO ARE NOT UNITED STATES CITIZENS**

Information collected on this questionnaire will not be reported to any United States government agency, including but not limited to, the U.S. Bureau of Citizenship, Immigration Services or Department of Homeland Security unless specifically requested by such an agency.

**1. What is your immigration status? (Check One)**

**Nonimmigrant Visa Holder**

Type: \_\_\_\_\_

Date Issued: \_\_\_\_/\_\_\_\_/\_\_\_\_ Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Entry Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Admitted Until: \_\_\_\_/\_\_\_\_/\_\_\_\_

Check here if no expiration date.

**Lawful Permanent Resident Alien (Green Card Holder)**

Adjustment Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Alien Number: A# \_\_\_\_\_

**Applicant for Lawful Permanent Residence**

Date Applied: \_\_\_\_/\_\_\_\_/\_\_\_\_

If you have an **immigrant visa**, enter type: \_\_\_\_\_

**Lawful Temporary Resident (or Applicant for Lawful Temporary Residence)**

Adjustment Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Alien Number: A# \_\_\_\_\_

If an applicant, date applied: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Political Asylee or Asylum Applicant**

Date Applied/Granted: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Refugee**

Date Applied/Granted: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Family Unity Program Beneficiary (or Applicant)**

Date Applied/Granted: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Temporary Protected Status (“TPS”) (or Applicant for TPS)**

Date Applied/Granted: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Violence Against Women Act (“VAWA”) Self-Petition Grantee (or Applicant for Self-Petition)**

Date Applied/Granted: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Other**

Check here if your status is not listed above, you entered the United States without the authorization of the U.S. Bureau of Citizenship or Immigration Services or if your visa expired.

**2. If you have a Work Authorization Card (e.g., I-688B), enter the following:**

Category (i.e., Provision of Law): \_\_\_\_\_

Card Valid From: \_\_\_\_/\_\_\_\_/\_\_\_\_

Expires: \_\_\_\_/\_\_\_\_/\_\_\_\_

**You must bring documentation of your immigration status with you. If you are under 19, you must also bring documentation of your parent’s or guardian’s immigration status as well.**

## PART D – SPECIAL EXCEPTIONS TO BE COMPLETED WHERE APPLICABLE

In some cases, even if you have not been in California for more than a year and one day, you may still qualify for either residence classification or a tuition/fee waiver under one of the following special exceptions provided by law. Check if any one of the following exceptions applies, and please bring the requested documentation (an original and one copy) with you.

**Self Support** (T5 §54040)

If you are under 19 years of age, and you have supported yourself financially for at least one year and a day, please provide the following:

- (1) Documentation of employment (either W-2 forms or a letter from your employer showing earnings for the past year),
- (2) A statement that you have actually been present in California for the past year, AND
- (3) A statement showing all your expenses for the past year.

**Dependent of a Military Member** (T5 §54041)

If you are a child or spouse of a member of the armed forces of the United States who is stationed in California, please provide the following:

- (1) A statement from the military person's commanding officer or personnel officer, AND
- (2) Evidence that you are a dependent of the military person's for federal tax purposes.

**Military Member on Active Duty in California** (T5 §54042)

If you are a member of the armed forces of the United States stationed in California on active duty and not assigned for educational purposes to an SBCCD college, please provide the following:

- (1) A statement from your commanding officer or personnel officer that the assignment to active duty in California is not for educational purposes AND
- (2) Evidence of the date of assignment to California.

**Military Member Remaining in California After Discharge** (EC §68075.5)

If you were: (1) a member of the armed forces of the United States who was stationed in this state on active duty for more than one year immediately prior to being discharged AND (2) have remained in California after your discharge for less than a year and one day, you may be eligible for resident classification. Please provide a copy of your Military Discharge Form, DD-214.

**AB540 Exempt** (T5 §54045.5, EC §68130.5)

If you attended a California high school for at least three (3) years and graduated or received a certificate of completion, please submit the following:

- (1) AB540 Tuition Exemption form.
- (2) Official sealed high school transcripts.

**Public School Employee With a Valid Credential or Emergency Permit** (T5 §54046)

If you hold a valid credential or a valid emergency permit authorizing service in the California public schools, are employed by a school district in a full-time position, and are enrolling in an SBCCD college to fulfill credential requirements, please provide the following:

- (1) A statement from your employer showing that you are employed in a full-time position requiring certification qualifications AND
- (2) A copy of your credential.

**Adult Dependent of a California Resident** (EC §68076)

If you have not been an adult resident of California for more than one year and you either (a) are the dependent child of a California resident who has residence in California for more than one year or (b) have a parent who has both contributed court-ordered support for you on a continuous basis and has been a California resident for a minimum of one year, please provide documentation of your parent's California Residency.

**Agricultural Laborer for Hire (or Child of Such Laborer)**

(T5 §54048)

("Agricultural labor for hire" means seasonal employment in connection with actual production of agricultural crops, including seeding, thinning and harvesting.) If your parent earns a livelihood by performing agricultural labor for hire, please provide the following: (1) Evidence that your parent with whom you live earns a livelihood primarily by performing agricultural labor for hire and has performed such labor in California for at least two months in each of the two preceding years, (2) Evidence that your parent lived within the district, AND (3) Proof that your parent claims you as a dependent on his/her income tax return, if your parent had sufficient income to incur personal income tax liability.

If you are an agricultural laborer for hire, please provide evidence showing that you earn a livelihood primarily by performing agricultural labor for hire and that such labor has been performed in California for at least two months in each of the preceding two years.

**Graduate of a School in California Operated by the United States Bureau of Indian Affairs** (EC §68077)

If you are a graduate of any school located in California that is operated by the United States Bureau of Indian Affairs, including, but not limited to, the Sherman Indian High School, please provide a copy of your diploma.

**Full-Time Employee of a California State Agency Assigned to Work Outside California (or Child or Spouse of Such Employee)** (EC §68079)

If you, your parent or spouse is a full-time employee of a California state agency (i.e., any office, department, division, bureau, board or commission of the state of California) and assigned to work outside California, please provide the following:

- (1) Evidence of such employment AND
- (2) Evidence of the out-of-state assignment.

**Relocated Federal Civil Service Employee (or Child of Such Employee)** (EC §68084)

If you or your parent is a federal civil service employee who moved to California as a result of military mission realignment action that involved the relocation of at least 100 employees, please provide:

- (1) Evidence of such employment AND
- (2) Evidence of the reassignment to California.

**To Be Hired By a Public Agency as a Peace Officer** (EC §76140.5)

If a public agency (e.g., city, county, district or other local authority or public body of or within the state of California) intends to classify you as a peace officer upon successful completion of a police academy training course at an SBCCD college, please provide the following:

- (1) Evidence that you have passed all other requirements of the hiring public agency AND
- (2) Evidence that the public agency intends to classify you as a peace officer.

**Surviving Dependent of Any Individual Killed in the September 11<sup>th</sup> Attacks** (EC §76300 (j))

If you are a surviving dependent of an individual killed in the September 11, 2001 terrorist attacks (i.e., the World Trade Center in New York City, the Pentagon in Washington, D.C., or the crash of United Airlines Flight 93 in Pennsylvania) and you were given written notice of eligibility for a tuition and fee waiver by the California Victim Compensation and Government Claims Board, please provide a copy of your notice of waiver.

**PART E – TO BE COMPLETED BY ALL STUDENTS**

**Residence Determination Date**

“Residence determination date” is that day immediately preceding the opening day of instruction of the quarter, semester, or other session as set by the district governing board, during which the student proposes to attend a college. (T5 §54002)

**One-Year Waiting Period**

The one-year residence period which a student must meet to be classified as a resident does not begin to run until the student both is present in California and has manifested clear intent to become a California resident. (T5 §54028)

**Required Documentation for Residency**

The burden of proof is on the student to clearly demonstrate both physical presence in California and intent to establish a permanent home in California. You are required to present evidence in accordance with Education Code Sections 68040 et seq.

A minimum of three (3) items of documentation are required in the following categories: **You must provide a minimum of one (1) item from Category A, one (1) item from Category B and one (1) additional item from either Category A or B.** Documents must be properly identified with the student’s name and a corresponding California address.

*No item may be used more than once within a category.*

✓	<b>Category A (Documentation of Intent to become CA. Resident)</b>	<b>Date Issued/Begun</b>
	Possessing a California driver’s license or identification card. DL/ID # _____ Expiration Date: ____/____/____	____/____/____
	Valid California Motor Vehicle Registration.	____/____/____
	Documentation of Voter Registration and voting in California.	____/____/____
	Licensing from California for professional practice.	____/____/____
	California State income tax return filed as a resident (Form 540) from previous year coupled with employment pay stubs dated prior to the determination date of residency. Pay stubs must reflect the student’s employment.	____/____/____
	Proof of jury duty service in a California court within the past year.	____/____/____
	Selective Service registration with a permanent California address.	____/____/____

✓	<b>Category B (Documentation of Physical Presence in CA.)</b>	<b>Date Issued/Begun</b>
	The documents presented must be valid, legible and cover the <b>one year and one day period prior to the Residence Determination Date.</b> Multiple statements may be required to cover the one year and one day period.	
	Documentation of ownership <b>and</b> continuous occupancy of residential property <b>or</b> continuous occupancy of rented or leased property, in California, covering the one-year period prior to the Residence Determination Date.	____/____/____
	Active membership in service or social club in California.	____/____/____
	Showing California as home address on federal income tax return (Form 1040) from previous year.	____/____/____
	Military records in student’s name showing California as the home of record (i.e. Copy of Orders, Military I.D., and DD214)	____/____/____
	Statements from an active bank account in California; must provide statements dated prior to the determination date of residency and current statements to verify the account is still active. Quarterly statements for the previous year will be required to determine residency.	____/____/____
	Petition for a divorce in California.	____/____/____
	Receipts showing payment of non-resident tuition at an out-of-state institution (outside California) with a California permanent home address.	____/____/____
	Utility bills (gas, water, power, telephone) covering the one-year period prior to the Residence Determination Date. E.g. At least one statement from each quarter for the year prior to the Residence Determination Date. Quarterly statements for the previous year will be required to determine residency.	____/____/____
	Documentation of public assistance, rehabilitation, unemployment, or other California state services/benefits received from a California state agency covering the one-year period prior to the Residence Determination date.	____/____/____

**Please list below other things you have done to justify your request to be classified as a California resident.** Physical presence within California solely for educational purposes does not establish residency. (Attach additional pages as needed)

**DECLARATION – TO BE COMPLETED BY ALL STUDENTS**



- **Do not fax this form.** You must submit the following as a packet to the Admissions & Records Office (SSA-213) in-person or by mail:
- Valid Photo Identification (copy if mailing packet),
  - Supplemental Residency Questionnaire,
  - A copy of all documentation provided to be attached to this form.

If you have questions about completing this form, required documentation, exceptions or the residency classification procedure, please contact the Admissions & Records Office at (909) 389-3372.

**WARNING: Falsifying information about citizenship, California residency, financial aid, and/or military status could result in:**

- (1) *criminal charges for perjury and/or fraud and, if convicted, imprisonment;*
- (2) *student disciplinary action; and/or*
- (3) *accumulated monetary charges such as for restitution or nonpayment of non-resident fees.*

I certify under penalty of perjury that all the information I have given on this form, including any attachments, is true and complete to the best of my knowledge. I understand that falsification or withholding of information requested shall constitute grounds for dismissal. I understand if it is determined I do not meet the requirements to be classified as a resident, I will be responsible for payment of nonresident fees. I understand that failure to pay these fees in accordance with the College’s payment policy will result in my courses being dropped for non-payment. I understand that I will be requested to provide proof of some statements in accordance with Education Code Sections 68040 et seq.

\_\_\_\_\_

**Student’s Signature**

\_\_\_\_/\_\_\_\_/\_\_\_\_

**Date**

**FOR OFFICE USE ONLY**

**Residence Determination Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Residence Determination:**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> California Resident                             | Resident as of: ____/____/____   |  |
| <input type="checkbox"/> Non-Resident                                    | Resident of: <input type="checkbox"/> State: _____                         |  |
|  | <input type="checkbox"/> Foreign Country                                   |  |
| <input type="checkbox"/> Non-Resident Qualifying for a Special Exception |  |  |
| <input type="checkbox"/> Pending:  | <input type="checkbox"/> Documentation does not cover one (1) year period. |  |
|  | <input type="checkbox"/> Documentation does not show intent.               |  |
|  | <input type="checkbox"/> Other (see notes below).                          |  |

- CCCApply Reviewed
- Datatel Residency Status Updated
- Semester Charges Recalculated in Datatel

Notes/Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**A&R Staff Signature**

\_\_\_\_/\_\_\_\_/\_\_\_\_

**Date**