	Dregon State	Oregon TECH		
For office use only Status: DEP IND	EP Date:	EffectiveTerm	_ Resident Non-	

 11
 Have you received financial assistance from a state or government unit (orthagethrain Federal Financial Add) ing the past 12 months? Yes

 Yes
 No

 If "yes," indicate stategency, and explain:

 Will you be receiving such assistance during the next 12 months?es

 No

If "yes," indicate stategency, type of assistance, disbursement date, and explain:

12 List totals of your expenses and financial resources the past 12 months:

a. Expenses:

Total Expenses: (includes tuitiment/mortgage, utilities, car payment, insurance, gas, groceries, spending monophics, etc.)

b. Financial Resources:

Self–Support: (includes wages, salaommission, unemployment benefits, alimony, etc.	\$ Identify source(s):
Support from parent, guardian or other person not including spouse:(includes room and board, tuition assistance, other general monetary support)	\$ Identify relationship:
Support received from ederalor state financial ad:	\$ Identify type of aid:
Other sources of support(includes spousal income, gifts, loans, savings, inheritance, trusts, stocks, VA benefits)	\$ Identify specific source(s):

Section 2: Dependent or I ndependent

A Are you applying for resident status as a depe**stleate**nt whose parent, legal custodian, or other person upon whom you are dependent, has maintained a bona fide domicile in the State of Oregon for the past year? Yes No

> If "yes," your parent, legal custodian, or other person upon whom you are dependent, must complete Section 3 of this form providing proof of his/her Oregon domicile. Verification of your dependent status must be documented by submitting a true and correct copy of **ther**son's state and federal income tax returns top portion listing exemptions and signature section ohligh the most recent tax year.

Section 3: Proof of Residency

This section is being completed and signed **By**udent Parent Legal Custodian Other person upon whom the student is dependent (Note: Not to be completed by spouse except for military.)

Do not leave any questions blank. No action nor decision can be made unless all questions are completed and all required documentary evidence is submitted.

1	Name Last First Middle				Phone ()						
	Last	First	Middle								
	Address										
	Number	C	City	State	ZIP						
2	Date of arrival in Oregon to es	tablish a permanent hon	n <u>e: Mo.</u> Day <u></u> Yr	Why y	ou moved to @g on						
3	Are you a citizen of the USA? other documentation reflecting			both sides of yo	ur Resident Alien Ca	rd, Form94, or					
4	Are you currently on active duty, or a member of a reserve component, of the U.S. armed forces (Army, Navy, Air Force, Marine Corps,										
	Guard, National Guard)? Yes No If "no," skip to question 5.										
	(a) If "yes" to question 4, are you stationed and residing in Oregon?es No If "yes," you must attach documentation confirming your current mili (@D286).gmilitary states or statement from commanding of										
	(b) If "yes" to question 4, but have not been stationed/residing in Oregon, indicatecentistluty station:										
	State or country			from	to						
	(c) If "yes" to question 4, have you ever filed an Oregon income tax return? No Date Oregon income tax return(s) was/were <u>filed</u> If "yes," you maistach copy of mest @regon income tax return(s).										
	(d) From what state did you	enter the military?	Dischar	ge Dat <u>e</u>	(Provide copy of	DD214 form.)					
5	Are you the spouse or depend	lent child of an armed fo	rces member assigned to	duty in O régs n?	' No						
6	Do you own rent your ho	ousing? If not, explain h	ow your housing is pr <u>ovic</u>	led							

9 Are you registered to vote?