

Resident Classification Request

Who needs to use this form?

Undergraduate and graduate students who are U.S. residents, citizens, refugees or asylees and need verification of Minnesota state residency status for financial aid or other purposes.

This form is not for use by international or undocumented students.

Important Notes

Some information requested on this form is classified as private. You are not legally required to provide the information, but failure to do so will prevent your request from being considered.

How to Submit

- Be sure to include all requested documentation necessary to process your request.
- Your name must be visibly printed on all documentation provided.
- Submit this form in person or by mail to the Gateway Student Services Center.
- You will be notified by email with the result of your request.

	SEC	TION 1: STUDI	ENT INFOR	MATION		
Last name	First	name		Middle name		
Metro State student ID number M	letro State e		Phone number (with area code)			
Residence(s) over the past 12 months (Street	(include add Unit	ress and begin/en City	d dates of resid	dency for o	each locatior ZIP	n): Begin date/end date
Street	Unit	City		State	ZIP	Begin date/end date
Have you resided in Minnesota for at I purposes of attending a college or un	_	_	during that tin	ne NOT be	een in the sta	ate solely or primarily for the
If Yes: Attach at least one form of supporting documentation from the list below that verifies your physical presence in Minnesota for the past 12 months. Acceptable documentation includes: • Minnesota driver's license • Minnesota lease agreement • Minnesota automobile registration • Minnesota voter registration • Deed to a home in Minnesota • Purchase agreement for a home in Minnesota			 Minnesota income tax return (for previous year) Notarized letter from a Minnesota resident verifying that you have resided with them for the past 12 months. If you choose this option, include a letter explaining your reasons for residing in Minnesota. If No: Review the conditions on the second page by which a nonresident can receive the in-state tuition rate. Write your initials on the line before the condition that applies to your situation. 			
		CERTIFICA	TION AREA	A		
All information provided in support of for unpaid tuition from resident classifi		·		-	_	
Registrar's office signature:	Date (MM/DD/YYYY):					
		OFFICE	USE ONLY			
Residency request approved: O Yes	O No					
Processed by:	Date (MM/DD/YYYY):					

Contact us: gateway@metrostate.edu | 651.793.1300



EXCEPTIONS

Initial here

ACTIVE DUTY MILITARY

I am a veteran (or the spouse/dependent of a veteran) who lives in Minnesota and have served or am currently serving in the armed forces.

If this applies to you: Attach a copy of your DD-214, or your orders if you are active duty. Spouses must also submit a marriage certificate and dependents must submit proof of dependency (i.e. income tax form).

Initial here

MIGRANT FARM WORKERS

I am a student who has been in Minnesota as a migrant farm worker, as defined in the Code of Federal Regulations, title 20, section 633.104, for at least two years immediately prior to admission or readmission to a Minnesota public postsecondary institution, or I am a dependent of such a person.

If this applies to you: Attach Minnesota Migrant Certificate of Eligibility. Dependents must submit proof of dependency (i.e. income tax form).

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MINNESOTA HIGH SCHOOL GRADUATES

I graduated from a Minnesota high school and was a Minnesota resident while attending that high school -and- I am physically attending Metro State University.

If this applies to you: Attach a copy of your high school transcripts and proof of residence in high school (if not on transcript).

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EMPLOYMENT-RELATED RELOCATION

I have accepted permanent, full-time employment prior to moving to Minnesota and before applying for admission to Metro State University -or I was relocated to Minnesota by my employer -or I am the spouse or dependent of such a person.

If this applies to you: Attach a letter on official letterhead from your/your spouse's/your guardian's employer verifying the dates of employment and/or statement of transfer and number of hours per week worked. Spouses must also submit a marriage certificate and dependents must submit proof of dependency (i.e. income tax form).

Initial here

REFUGEES AND ASYLEES

I am a student who is recognized as a refugee or asylee by the Office of Refugee Resettlement of the United States Department of Health and Human Services.

If this applies to you: Attach documentation from the Office of Refugee Resettlement.

Initial here

CONTINUOUS PRESENCE IN MINNESOTA

I am a Minnesota resident who was temporarily absent from the state without establishing residency elsewhere.

If this applies to you: Submit a history of your absence from Minnesota along with proof of Minnesota residency (i.e. proof of nonresident status at an out-of-state school).

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DOMICILE OF PARENT/LEGAL GUARDIAN OR SPOUSE

I am the dependent or spouse of an individual residing in Minnesota at the time I applied for admission to Metro State University.

If this applies to you: Attach proof of Minnesota residency of parent, legal guardian, or spouse. Spouses must also submit a marriage certificate and dependents must submit proof of dependency (i.e. income tax form).

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