

# Residency Appeal Information

We recognize the residency process can seem overwhelming. These notes are meant to help you during the residency process. If you have questions regarding your residency papers, please contact the Residency Officer, Lauren Mattox at 859-234-8626 ext. 66436 or lauren.mattox@kctcs.edu.

- Know the tuition deadline. Filing a residency appeal does not count as payment.
- Please allow at least one week between filing and the tuition deadline. If you apply for residency within five (5) business days of the tuition deadline, your appeal may not be reviewed prior to tuition being due and you are responsible for your full balance.
- If you choose to stay in courses past the 100% refund deadline and your appeal is denied, this is not justification for a 100% refund when dropping/withdrawing from your courses.
- To be considered for a change of status in a current term you must apply within the first 30 days of the start of the semester. Any request received after this date may be considered for future semesters/enrollment only.
- Please provide an email address and a phone number where you can be reached or have access to voicemail. The Residency Officer may contact you via phone or email if additional information is needed. Please respond to any inquiries about your residency appeal within five (5) business days. If the Residency Officer does not hear from you this may be reason for automatic denial.

## Required Documentation:

Please select your current situation below. **All bolded items are required**, after review of your packet the Residency Officer may request more information.

### Independent Student over the age of 24 (claimed self on tax returns)

- **Lease or deed to residence**
- **KY driver's license or state ID**
- **KY vehicle registration, if you have a car**
- **KY voter registration, if registered** <https://cdcbp.ky.gov/VICWeb/index.jsp>
- **Proof of having lived in KY for the last 12 months. If one of the documents above has a date older than 1 year, that is acceptable.**
- Letter from employer including dates of employment, position, salary and hours
- Proof of KY state income tax return for the preceding year with W-2 or 1099
- Proof of current pay stub as evidence of paying withholding taxes in Kentucky
- Proof of visa or immigration status, if applicable

### Independent Student under the age of 24 (claimed self on tax returns)

- **Lease or deed to residence**
- **KY driver's license or state ID**
- **KY vehicle registration, if you have a car**
- **KY voter registration, if registered** <https://cdcbp.ky.gov/VICWeb/index.jsp>
- **Proof of having lived in KY for the last 12 months. If one of the documents above has a date older than 1 year, that is acceptable.**
- Letter from employer including employment dates, position, salary and hours
- Proof of KY state income tax return for the preceding year with W-2 or 1099
- Current federal tax, 1040 document
- Proof of current pay stub as evidence of paying withholding taxes in Kentucky
- Notarized letter from parents regarding financial support and/or previous year's income tax returns
- Proof of visa status, if applicable

### Dependent Student (claimed on tax returns by parent(s) or spouse that lives in Kentucky)

- **Deed/Lease or Rental Agreement to Residence**
- **If dependent upon Spouse, Marriage License**
- **If dependent upon Parent, Birth Certificate**
- **Valid KY Driver's License or KY Issued ID (Student and Spouse/Parent) with current address**
- **KY Vehicle Registration (Student and Spouse/Parent)**
- **KY Voter Registration (Student and Spouse/Parent) Get Voter Info Online: <https://vr.sos.ky.gov/vic/>**
- **KY state income taxes with W2 or state financial support (like SNAP) where student is listed as a dependent.**
- **Proof of residence for 12 months. One of the documents above must have a date older than one year.**
- Parent or Spouse Employer Letter: dates of employment, position, salary and hours
- Proof of visa status, if applicable (Student and Spouse/Parent)

## RESIDENCY QUESTIONNAIRE

Please complete this form, along with supporting documents, and return it to:

Maysville Community and Technical College  
 Lauren Mattox, Director of Admissions  
 319 Webster Avenue  
 Cynthiana, KY 41031

Name: \_\_\_\_\_ Student ID# \_\_\_\_\_

1. What term are you applying for? Fall  Spring  Summer
2. Are you 18 years of age or over and independent of parent or guardian? Yes  No
3. How long have you continuously lived in Kentucky?
4. What is your citizenship status?

USA  Naturalized  Alien (Temporary)  Alien Permanent)

If not a US Citizen, what is your VISA Type? \_\_\_\_\_

5. Did you graduate from a Kentucky high school? Yes  No

Name of Kentucky high school: \_\_\_\_\_

Date of graduation from high school: \_\_\_\_\_

6. Have you attended any other college or university in the past three years? Yes  No

*If you attended another college, university or private high school, please complete the following information about your residency status. If residency for tuition purposes is not applicable at an institution, please check "N/A".*

College/University	Dates Attended	Resident	Non-resident	N/A

7. Are you currently active duty, stationed in Kentucky? Yes  No

Are you a discharged military member? Yes  No  Date: Month \_\_\_\_\_ Year \_\_\_\_\_

Are you a dependent or spouse of active military personnel, stationed in Kentucky? Yes  No

Was Kentucky the state of residency at the time of induction? Yes  No

Did you or military member maintain Kentucky as legal residence while in service? Yes  No

8. Please provide a full explanation of the reason(s) why you believe you should be a Kentucky resident for tuition purposes.

I certify that all information I have provided above is true to the best of my knowledge. I understand that if I provide false information, my residency status may remain as out-of-state at Maysville Community and Technical College.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

### Office Use Only

Decision: \_\_\_\_\_ Resident \_\_\_\_\_ Non-resident \_\_\_\_\_ Affidavit Mailed \_\_\_\_\_ Term \_\_\_\_\_

Approved By: \_\_\_\_\_  
 Director of Admissions \_\_\_\_\_ Date \_\_\_\_\_