



Express Application for New York State Residency for Tuition Billing Purposes

IMPORTANT:

This application should be used only if at least one of the following circumstances have been met:

1) You have attended an approved New York State high school for two or more years, graduated from an approved New York State high school and applied for admission to the University within five years of receiving a New York State high school diploma;

OR

2) You have attended an approved New York State program for a General Equivalency Diploma (GED) exam preparation, received a GED and applied for admission to the University within five years of receiving the GED.

All others should complete the full Application for New York State Residency for Tuition Billing Purposes, online at: www.stonybrook.edu/bursar/residency

SECTION A (To Be Completed By All Applicants)

Semester Applying For:

Student Name:

Academic Level:

Undergraduate

Graduate/Professional

Student ID:

(Last)

Date of Birth:

(First)

(Middle)

Age:

Email Address:

Citizenship:

U.S

Permanent Resident

Alien Registration Number:

Are you an undocumented alien?

Yes No

(If yes, attach expired visa, complete attached Affidavit)

Check One:

1) I have attended and graduated from a New York State high school, having attended that school for two or more years.

Yes

No

Period of Attendance: _____

Name of School: _____

City: _____

County: _____

2) I have attended an approved New York State program for a General Equivalency Diploma (GED) exam preparation, and received a GED issued by New York State.

Yes

No

****IMPORTANT****

You MUST attach copy of your final high school transcript or GED.

For Office Use Only

STOP! Applicant Affirmation – To Be Completed Before a Notary Public

STATE OF NEW YORK)
COUNTY OF) SS.:

I, _____, the applicant herein, being duly sworn, do hereby affirm that all information provided on this form and any attachments thereto, is accurate, complete and true to the best of my knowledge. I understand that knowingly providing false information will disqualify me from residency status for tuition billing purposes and render this application null and void.

Applicant Signature

Sworn to before me this _____ Day of _____, 20 _____

Notary Public

**THIS SECTION IS TO BE COMPLETED ONLY BY STUDENTS THAT DO NOT CURRENTLY HAVE
LAWFUL IMMIGRATION STATUS.**

This Affidavit Must Be Completed Before a Notary Public.

STATE OF NEW YORK)
COUNTY OF) SS.:

I, _____, the applicant herein, being duly sworn, deposes and says that he/she does not currently have lawful immigration status, but has filed an application to legalize his/her immigration status, or will file such an application as soon as he/she is eligible to do so.

Applicant Signature

Sworn to before me this _____ Day of _____, 20 _____

Notary Public