

**THE UNIVERSITY OF KANSAS
APPEAL TO THE RESIDENCE COMMITTEE**

Name _____

Date _____

Address _____

Student No. _____

Telephone No. _____

- A. I understand that, based on my Application for Resident Classification, I have been classified a non-resident for fee purposes.
- B. I hereby appeal this classification by requesting that my Application for Resident Classification be presented to the Resident Committee for review.
- C. I would like any further documentation I have attached reviewed.
- D. I would like the following information taken into consideration (Please attach a two to three page letter to the committee discussing why you feel you meet the criteria to gain resident tuition classification).

I certify that the information on this Appeal of Resident Classification is correct and that the information on my Application for Resident Classification is still correct.

Signature

***NOTARIZATION** (Required only if additional information is submitted under item C or D.)

Subscribed and sworn to (or confirmed before) me this _____ day of _____

20____, at _____, _____
City State

My Commission expires:

Notary Public

Return to: Residency Appeals Committee, Office of the University Registrar, 121 Strong Hall, 1450 Jayhawk Boulevard, Lawrence, KS 66045-7535. (785) 864-4472.