

University of Kansas
Office of the University Registrar
Clarification Questionnaire

Return within thirty days of the date of the enclosed letter.

Student Name: _____ Student KU I.D Number: _____

Term _____

Address to which you want reply sent: _____
Street City State Zip Code

Date of Birth: _____ Social Security Number: _____

* Disclosure of Social Security number is voluntary. It is requested to facilitate accurate record keeping and identification. Complete this questionnaire, front and back if you are claiming to be eligible for resident fee rates.

Circle One:

- Yes No 1. Are you a citizen of the United States?
Yes No a. If not, do you hold a Resident Alien Card?
b. Attach a copy of your Resident Alien Card, front and back.
Yes No 2. Do you maintain a home in another state?
Yes No 3. Are you licensed in a practicing profession in Kansas?
Yes No 4. Were you claimed as a dependent for income tax purposes last year?
a. If yes, by whom? _____
Name Relationship City State
Yes No 5. Do you have a driver's license?
a. If yes: Date of Issuance: _____ State Issued in: _____
Yes No 6. Are you registered to vote?
a. If yes: Date of registration: _____ State and County: _____
Yes No 7. Do you own a home in Kansas?
a. If yes: Date of purchase: Month _____ Day _____ Year _____
Yes No 8. Do you own a motor vehicle?
a. If yes, where is it registered? State: _____ Date of registration: _____
Yes No 9. Did you file a state income tax return in Kansas?
a. If yes, list the years you filed in Kansas: _____
b. If no, list the years you filed in another state: _____
Yes No 10. Are you or have you ever been a student at Haskell Indian Nations University?
Yes No 11. Do you have a parent(s) who lives in KS?
a. If yes, list dates of your parent(s) physical residence in KS: From _____ To _____

12. Please list your dates of continuous physical residence in Kansas.
From: Month _____ Day _____ Year _____ To: Month _____ Day _____ Year _____

13. List your dates of extended (one month or more) absences from Kansas:
(If absent within the last year, attach a written explanation of the absences)

University of Kansas
Office of the University Registrar
Clarification Questionnaire
Return within thirty days of the date of the enclosed letter.

From: Month_____ Day_____ Year_____ To: Month_____ Day_____ Year_____

14. List your dates of employment in Kansas:

From: Month_____ Day_____ Year_____ To: Month_____ Day_____ Year_____

15. In the past twelve months, what percentage of your financial support came from Kansas sources? _____%
If less than 100% list other sources: _____

16. Please provide a written explanation of why you have listed a non-Kansas address on the student record system:

17. Please provide any additional information or explanations you feel will clarify your tuition status
(attach additional pages if needed): _____

IMPORTANT: If false information or any falsified supporting document is included in this questionnaire, the questionnaire will be void and any determination of in-state classification based on the questionnaire will be nullified.

I certify that the information given on this questionnaire is accurate and complete and that all documents attached hereto are true and unaltered copies of the originals requested. If any circumstances change affecting the tuition classification status requested by this questionnaire, I agree to notify the Office of the University Registrar in writing within 15 days after such change.

I understand that falsified information can result in financial obligation (non-resident fees) to , and dismissal from, the University of Kansas and that making a false writing is a felony under Kansas Law (K.S. A 21-3711). I also understand that information from my application for admission and other university records will be considered as part of this questionnaire.

State of _____

Date: _____

County of _____

Signature: _____

(In presence of Notary Public)

Sworn/Affirmed to and subscribed before me on this

_____ day of _____, 20____

Signature of Notary Public

My Commission Expires: _____

Return to: Office of the Registrar
Mail Stop 4005
3901 Rainbow Blvd
Kansas City, KS 66160
(913) 588-7055 / kumcregistrar@kumc.edu

Last Updated: June 2016