

STATEMENT OF LEGAL RESIDENCE

Name _____ SSN _____
Address _____
City _____ State _____ Zip _____ Date of Birth _____

PART A To Be Completed By All Applicants

Have you lived in California for the past two years?

Yes ____ If you answered "Yes" and you are unmarried and under the age of 19, go to **Part B. Otherwise, skip to Part D.**

No ____ If you answered "No", complete the following:

- Date present stay in California began _____
- Do you intend California to be your permanent residence? Yes ____ No ____
- Date present stay in California began _____
- Did you file California State Income Tax for the last two years? Yes ____ No ____
- Are you a public school credentialed employee? Yes ____ No ____
- Are you a seasonal agricultural employee or dependent? Yes ____ No ____

- Drivers License or ID Card State: _____ Date Issued: _____
- Registered to Vote? State: _____ Date Registered: _____
- Vehicle Registration? State: _____ Date Issued: _____

• Other Proof of Residency in California _____

• List states lived in for the last two years and the dates:

State: _____ from _____ to _____

State: _____ from _____ to _____

PART B To Be Completed About Your Parents or Legal Guardian If You Are Unmarried AND Under the Age of 19

I have lived continuously for the past two years with one or both of my parents and he/she/they have lived continuously for the past two years at the California address noted below:

Street _____ City _____ State _____

Yes ____ If "Yes", Check one: Both Parents ____ Mother ____ Father ____ Legal Guardian ____

No ____ If "No" and you wish to be considered a California resident, please complete the following about your parent(s) or legal guardian:

• Did they file California State Income Tax the last two years: Yes ____ No ____

• Does he/she/they have any of the following?

- Driver's License or ID card State: _____ Date Issued: _____
- Voter Registration? State: _____ Date Registered: _____
- Vehicle Registration? State: _____ Date Issued: _____
- Other Proof of Residency in California _____

PART C To Be Completed by Active Military Persons, Dependents, or Veterans Discharged Within the Last Year

- Are you a member of the military? Yes ____ No ____
- Are you a dependent of an active military person? Yes ____ No ____
- When did your or your sponsor's tour begin in California? _____
- What is your state of legal residence on military records? _____

Note: Active duty military persons and/or dependents must provide a statement from the commanding officer stating the date of assignment and that the assignment to California is not for educational purposes. Dependents must also provide a letter stating that they are the dependent of a military person for the purposes of Federal Tax exemption.

PART D To Be Signed by All Applicants

I declare under penalty of perjury that the statements submitted by me in connection with this application and for determination of residency are true and correct. All materials submitted by me for purposes of admission become the property of Gavilan College. I understand that falsification, withholding pertinent data, or failure to report changes in residence may result in my dismissal from the College.

Student's Signature

Date

