



Nevada System of Higher Education
Residency Application - Residency Audit -
Western Nevada College

Attention: Students who are U.S. military veterans or a spouse or dependent of a veteran, including those seeking coverage under **Section 702 of the U.S. Choice Act** and individuals using transferred benefits under the Post-9/11 Veterans Educational Assistance, please do not use this form; instead, please use the NSHE form linked here: [Veterans, Spouses and Dependents: Information Request Form for Determination of Tuition Charges](#)

Submission Information

Submit this form and the required documentation by the institutional deadline to:

IN PERSON or by MAIL to:

Western Nevada College
 Admissions & Records
 2201 W College Parkway
 Carson City, NV 89703

FAX to:

775-445-3147

EMAIL to:

admissions.records@wnc.edu

Institutional Deadlines for Submission of the Residency Form:

The Friday of the second week of instruction for the applicable semester. Applications/documents submitted after this date will be considered for the following semester, **no exceptions** for students enrolled in full-term classes. It is highly recommended that submissions occur at least one week prior to the first day of instruction of the applicable semester; no refunds will be granted for students with denied applications who drop after the 100% refund period.

Last Name		First Name		MI
Date of Birth	NSHE ID#	Email Address	Phone Number	
Address				
Street		City	State	Zip Code
Year/Semester Applying for Residency				
Year: _____	Semester:	<input type="checkbox"/> Fall	<input type="checkbox"/> Spring	<input type="checkbox"/> Summer
I hereby certify that all statements are true and correct; and I fully understand the decision by an institution to grant resident student or nonresident student status for tuition purposes does not create a vested interest or right to rely on that decision if it was made in error by the institution or was obtained under false pretenses.				
Signature			Date	

Form Instructions

Three (3) options are available for students to establish residency for tuition purposes under *Title 4, Chapter 15* of the Board of Regents *Handbook*:

Option 1 – New/Current Students: Exemption from tuition. If you qualify under Option 1, do not complete Option 2 or Option 3.

OR

Option 2 – New Students. If you do not qualify under Option 1, you must complete Part A and Part B to be considered for resident student status.

Additional Information:

After you submit this form to your NSHE institution in the manner prescribed by the institution, the institution may contact you to request additional information to verify the information submitted. *No decision will be retroactive.*

OPTION 1: NEW/CURRENT STUDENTS – EXEMPTION FROM TUITION

If you qualify under one of these categories, check the box and submit the required documentation. Do NOT proceed to OPTION 2 or 3.			
	Description	Required Documentation	Official Use Only
<input type="checkbox"/>	Currently attending or a graduate of a Nevada high School or a student who successfully completed the high school equivalency assessment selected by the State Board of Education, if the assessment was administered in Nevada.	<input type="checkbox"/> If a graduate, an official Nevada high school transcript; or <input type="checkbox"/> If currently attending a Nevada high school, verification of enrollment from the high school; or <input type="checkbox"/> If successfully completed a high school equivalency assessment, Nevada Certificate of High School Equivalency.	Yes No
<input type="checkbox"/>	Currently attending or previously attended a Nevada System of Higher Education (NSHE) institution (i.e., UNLV, UNR, NSU, CSN, GBC, TMCC, WNC) as a Nevada resident for tuition purposes.	Documentation from NSHE institution indicating Nevada resident status.	Yes No
<input type="checkbox"/>	NSHE Employees: A professional employee, classified employee, postdoctoral fellow, resident physician, or resident dentist currently employed at least half time, or the spouse or dependent child of such an employee.	Copy of current employment contract or letter/documentation from Human Resources. AND – if applicable: <input type="checkbox"/> For spouse, copy of marriage license or Declaration of Domestic Partnership. <input type="checkbox"/> For dependent, copy of the NSHE employee’s federal income tax return or federal tax transcript for the most recent tax year.	Yes No
<input type="checkbox"/>	A graduate student enrolled in the NSHE and employed by the System in support of its instructional or research programs (<i>this form may not be necessary—verify with Registrar</i>).	Documentation or confirmation from NSHE institution indicating status as a graduate student and NSHE employment in support of instructional or research programs.	Yes No
<input type="checkbox"/>	Graduate Fellow	Documentation or confirmation from NSHE institution indicating status as a graduate fellow.	Yes No
<input type="checkbox"/>	A member of the Armed Forces of the United States on active duty, stationed in Nevada as a result of a permanent change of duty station pursuant to military orders, or a person whose spouse, parent or legal guardian of such a person.	Copy of military orders indicating Nevada as a permanent duty station. AND – if applicable: <input type="checkbox"/> For spouse, copy of Military ID, <u>or</u> marriage license, <u>or</u> Declaration of Domestic Partnership. <input type="checkbox"/> For dependent, copy of Military ID <u>or</u> the member’s federal income tax return or federal tax transcript for the most recent tax year.	Yes No
<input type="checkbox"/>	A U.S. Marine stationed at Pickel Meadows, California as a result of a permanent change of duty station pursuant to military orders, or the spouse, or dependent of such a person.	Copy of military orders indicating Pickel Meadows as a permanent duty station. AND – if applicable: <input type="checkbox"/> For spouse, copy of Military ID, <u>or</u> marriage license, <u>or</u> Declaration of Domestic Partnership. <input type="checkbox"/> For dependent, copy of Military ID <u>or</u> the member’s federal income tax return or federal tax transcript for the most recent tax year.	Yes No
<input type="checkbox"/>	A financially dependent person whose spouse, family, or legal guardian has relocated to Nevada for the primary purpose of permanent full-time employment in Nevada or to establish a business in and living in Nevada. *An institution may require a student to submit a birth certificate or proof of legal guardianship.	<input type="checkbox"/> To establish dependency: A copy of parent/legal guardian/spouse federal income tax return or federal tax transcript for the most recent tax year filed listing the student as a dependent or spouse. AND at least one of the following: <input type="checkbox"/> Documentation from employer or Registered Apprenticeship Program on company letterhead indicating start date in Nevada and permanent, full time employment in Nevada; or <input type="checkbox"/> A copy of a Nevada business license and proof that the business is in operation.	Yes No
<input type="checkbox"/>	A financially independent person who has relocated to Nevada for the primary purpose of permanent full-time employment in Nevada or to establish a business in and living in Nevada.	Students under age 24 – to establish financial independence: <input type="checkbox"/> A copy of parent/legal guardian federal income tax return or federal tax transcript for the most recent tax year filed that indicates the student was not claimed as a dependent.	Yes No

		AND at least one of the following: <input type="checkbox"/> Documentation from employer or Registered Apprenticeship Program on company letterhead indicating start date in Nevada and permanent, full-time employment in Nevada; or <input type="checkbox"/> A copy of a Nevada business license and proof that the business is in operation.	
<input type="checkbox"/>	Licensed educational personnel employed full-time by a public school district in Nevada, or the spouse or dependent child of such an employee.	Copy of current employment contract. AND – if applicable: <input type="checkbox"/> For spouse, copy of marriage license or Declaration of Domestic Partnership. <input type="checkbox"/> For dependent, copy of federal income tax return or federal tax transcript for the most recent tax year.	Yes No
<input type="checkbox"/>	A teacher who is currently employed full-time by a private elementary, secondary or postsecondary educational institution or the spouse or dependent child of such an employee.	Copy of current employment contract. AND – if applicable: <input type="checkbox"/> For spouse, copy of marriage license or Declaration of Domestic Partnership. <input type="checkbox"/> For dependent, copy of federal income tax return or federal tax transcript for the most recent tax year.	Yes No
<input type="checkbox"/>	Member of a federally recognized Native American tribe or nation who currently resides on tribal lands located wholly or partially within the boundaries of the State of Nevada.	<input type="checkbox"/> Proof of tribal membership (i.e. tribal card or similar documentation); and <input type="checkbox"/> Proof of address on tribal lands	Yes No
<input type="checkbox"/>	U.S. military veterans, a spouse or dependent of a veteran, and those seeking coverage under Section 702 of the U.S. Choice Act, including individuals using transferred benefits under the Post-9/11 Veterans Educational Assistance.	Do not use this form. Please use the NSHE form linked here or contact your institution for more information: Veterans, Spouses and Dependents: Information Request Form for Determination of Tuition Charges	

If you checked one of the boxes under Option 1, STOP. If not, continue to Option 2.

OPTION 2: NEW STUDENTS WHO DO NOT QUALIFY FOR AN EXEMPTION UNDER OPTION 1

A student requesting resident student status under OPTION 2 must complete Part A and Part B.

OPTION 2/PART A – EVIDENCE OF NEVADA RESIDENCY			
	Description	Required Documentation	Official Use Only
<input type="checkbox"/>	A financially dependent* person whose spouse, family or legal guardian is a bona fide resident of the State of Nevada for at least 12 months immediately prior to the date of matriculation. *An institution may require a student to submit a birth certificate or proof of legal guardianship.	<input type="checkbox"/> To establish dependency: A copy of parent/legal guardian/spouse federal income tax return or federal tax transcript with a Nevada address** for the most recent tax year filed listing the student as a dependent or spouse. AND at least one of the following documents for the parent/legal guardian/spouse issued at least 12 months prior to the first day of instruction: <input type="checkbox"/> Evidence of Nevada as the spouse’s, parents’ or legal guardian’s permanent, primary residence (i.e. home ownership, a lease agreement, rent receipts, utility bills) <input type="checkbox"/> Nevada driver’s license <input type="checkbox"/> Nevada identification card <input type="checkbox"/> Nevada vehicle registration <input type="checkbox"/> Nevada voter registration **If the federal tax return/tax transcript does not have a Nevada address, additional documentation may be required.	Yes No
<input type="checkbox"/>	A financially independent person who is a bona fide resident of the State of Nevada for at least 12 months immediately prior to the date of matriculation.	Students under age 24 – to establish financial independence: <input type="checkbox"/> A copy of parent/legal guardian federal income tax return or federal tax transcript for the most recent tax year that indicates the student was not claimed as a dependent. ALL Students: At least ONE of the following documents for the student issued at least 12 months prior to the first day of instruction: <input type="checkbox"/> Evidence of physical, continuous presence in Nevada for 12 months (i.e. home ownership, a lease agreement, rent receipts, utility bills)	Yes No

OPTION 2/PART A – EVIDENCE OF NEVADA RESIDENCY			
	Description	Required Documentation	Official Use Only
		<input type="checkbox"/> A copy of the student’s federal tax return or federal tax transcript for the most recent tax year indicating a Nevada address (if 12 months are reflected) <input type="checkbox"/> Nevada driver’s license <input type="checkbox"/> Nevada identification card <input type="checkbox"/> Nevada vehicle registration <input type="checkbox"/> Nevada voter registration	

After completing Option 2/Part A, continue to Option 2/Part B.

OPTION 2/PART B – NON-U.S. CITIZENS			
A student who is not a citizen of the United States but who is lawfully present in the United States may be considered for resident student status.			Official Use Only
I am a U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No If “Yes,” stop. If “No,” continue with Part B.			Yes No
If you are not a U.S. citizen and are lawfully presented in the United States, you must present documentation from one of the following categories to be considered for resident student status:			
	Description	Required Documentation	Official Use Only
<input type="checkbox"/>	Permanent Immigrant Visa, a Temporary Resident Alien Card, Temporary Protected Status (TPS), or Official Asylum or Refugee Status.	Copy of current permanent immigrant visa; alien resident card; temporary protected status approval notice and I-94 (Arrival/Departure Record); or proof of official asylum or refugee status.	Yes No
<input type="checkbox"/>	Approved immigrant petition as a result of marriage to a U.S. citizen.	Proof of approved immigrant petition.	Yes No
<input type="checkbox"/>	Nonimmigrant Visa Classification (check box below that applies). <input type="checkbox"/> Foreign Government Official (A-1, A-2 or A-3) <input type="checkbox"/> Treaty Traders and Treaty Investors (E-1, E-2 or E-3) <input type="checkbox"/> Foreign Government Officials to International Organizations (G-1, G-2, G-3, G-4, G-5) <input type="checkbox"/> Temporary Workers (H-1B, H-1C, H4) <input type="checkbox"/> Foreign Media Representative (I) <input type="checkbox"/> Fiancé or spouse of U.S. citizen (K-1, K-2, K-3, K-4) <input type="checkbox"/> Intracompany Transferee (L-1A, L-1B, L-2) <input type="checkbox"/> Certain Parents and Children of Special Immigrants (N-8, N-9) <input type="checkbox"/> North Atlantic Treaty Organization: (NATO-1, NATO-2, NATO-3, NATO 4, NATO-5, NATO-6, NATO-7) <input type="checkbox"/> Workers with Extraordinary Abilities (O-1, O-3) <input type="checkbox"/> Athletes and Entertainers (P-1, P-2, P-3, P-4) <input type="checkbox"/> Religious Workers (R-1, R-2) <input type="checkbox"/> Witness or Informant (S-5, S-6, S-7) <input type="checkbox"/> Victims of a Severe Form of Trafficking in Persons (T-1, T-2, T-3, T-4, T-5) <input type="checkbox"/> Victims of Certain Crimes (U-1, U-2, U-3, U-4, U-5) <input type="checkbox"/> Certain Second Preference Beneficiaries (V-1, V-2, V-3)	<input type="checkbox"/> Copy of your I-94 (Arrival/Departure Record) AND <input type="checkbox"/> Proof of Visa Classification	Yes No

If you checked one of the boxes under Options 1 or 2, STOP.

If not and if you are a current or former student who is seeking reclassification after previously being classified as a nonresident student, go to Option 3.

For Official Use Only

Option 1 **Option 2** **Option 3**

Approved Denied Initials_____ Date_____/_____/_____

Notes: _____