FAU Charles E. Schmidt College of Medicine - Residency Statement

A Florida “resident for tuition purposes” is a person who has, or a dependent person whose parent or legal guardian has, established and maintained legal residence in Florida for at least twelve consecutive months preceding the first day of classes of the term for which Florida residency is sought. Residence in Florida must be as a bonafide domicile rather than for the purpose of maintaining a residence incident to enrollment at an institution of higher education. To qualify as a Florida resident for tuition purposes, you must be a U.S. citizen, permanent resident alien, or legal alien granted indefinite stay by the U.S. Citizenship and Immigration Services (USCIS). Other persons not meeting the twelve-month legal residence requirement may be classified as Florida residents for tuition purposes only if they fall within one of the limited special categories authorized by the Florida Legislature and State Board of Education. All other persons are ineligible for classification as a Florida “resident for tuition purposes.” Living in or attending school in Florida will not, in itself, establish legal residence. Residence for tuition purposes requires the establishment of legal ties to the state of Florida. Students must verify that they have broken ties to other states if the student has moved from another state.

Non-Florida Residents

I understand that I do not qualify as a Florida resident for tuition purposes for the term for which this application is submitted. If I should qualify for a future term, it will be necessary to file the required documentation prior to the beginning of the term to be considered for Florida residency classification.

Signature (in ink): ________________________________ Date: ____________________

Florida Residents

This section must be completed in full if you claim Florida residency for tuition purposes.

( ) I am considered an independent person (for tuition purposes) and have maintained legal residence in Florida for at least the past 12 consecutive months.

( ) I am a member of the armed services of the United States currently stationed in Florida on active military duty pursuant to military orders, my home of record is Florida, or I am a member’s spouse or dependent child. (Required: a copy of military orders or DD2058 showing home of record).

( ) I am an active member of the Florida National Guard who qualifies under s.250.10 (7) for the tuition assistance program.

Person claiming residency must complete this section in full.

I do hereby swear or affirm that I (the student named below) meet all requirements indicated for classification as a Florida resident for tuition purposes. I understand that a false statement in this affidavit will subject me to penalties for making a false statement pursuant to 837.06, Florida Statutes, and to FBOE Rule 6C-7.005 F.A.C.

Signature of person claiming Florida residency: ________________________________ Date: ____________________

Please Print:

Name of student: ________________________________

AMCAS #: ________________________________

Claimant’s permanent legal address: ________________________________

Claimant’s telephone number: ________________________________

Date claimant began establishing legal Florida residence and domicile: ________________________________

*Additional documentation may be requested after a review of the documents you have submitted.

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