

Emancipation Determination

Name: _____	
Date of Birth: _____	900#: _____
Email: _____	Phone Number: _____
I affirm that I have read, understand, and agree to this form in its entirety and that the information supplied is true and complete.	
Signature: _____	Date: _____

This form will be used to determine if a student under the age of 23 has been financially independent for 12 months preceding the start of classes and must accompany the Petition for In-State Tuition. Determination of emancipation requires complete financial disclosure. Evidence of emancipation is required.

DIRECTIONS:	<p>COMPLETE A <u>OR</u> B. COMPLETE PAGE TWO. PROVIDE EVIDENCE OF EMANCIPATION (see Petition for options).</p> <p>A. Student Declaration of Emancipation</p> <p>I, _____ being of legal age affirm to have no contact with my parents student because _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p style="text-align: center;">Brief explanation</p> <p>_____</p> <p style="text-align: center;">Signature of Student Date</p> <p>Parent/Legal Guardian Statement for Minor Claiming Emancipation Each living parent or legal guardian in which the student has contact with must complete the Statement for Minor Claiming Emancipation and have it notarized.</p>
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Office Use Only Box:			
Term: _____	Residency Status: _____	Approved/Denied by: _____	Date: _____

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1. List all financial support provided to you by your parents/legal guardian during the past 12-months:

Month /Year	\$ amount	Month/ year	\$ amount
Month/ Year	\$ Amount	Month/ Year	\$ amount

2. Last year you were claimed on your parents/legal guardian Federal Tax return?
year

3. Parent/legal guardian home address: _____
Street
city
state
zip

4. Dates you resided at your parent/legal guardian’s address in the past 2-years: _____
dates

5. List financial accounts you have owned in the past 12-months: (savings, checking, brokerage, credit card)

Institution	Type of account	Source of funds	Month/year active
Institution	Type of account	Source of funds	Month/year active
Institution	Type of account	Source of funds	Month/year active

6. List all expenses for the past 12 months: (estimate for months not yet completed)

MONTH & YEAR	TUITION AND FEES	RENT/MORTGAGE	LIVING COSTS
TOTALS			

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I _____ hereby affirm that I have entirely surrender the right to care
Parent or legal guardian
 and custody of _____ as of _____. The last time this minor
student date
 was claimed by me (us) as a state or federal income exemption was _____. The named
date
 above will not be claimed in this or subsequent years. The only financial support I have provided to
 this minor since emancipation has been _____

Brief explanation of assistance, if any

I certify that the emancipation referred to herein is an absolute financial emancipation for all purposes whatsoever and was not done for the purpose of tuition classification.

Parent/Guardian: _____
Print Name Signature Date

Parent/Guardian: _____
Print Name Signature Date

**NOTE: Copies of your most recent Federal Income tax returns (not W-2 forms) are required.
 Sign in the presence of a notary public.**

I hereby swear/affirm that the answers given in this emancipation determination are accurate and complete, and that all the documents, attached hereto, are true and unaltered. If my circumstances change, affecting my tuition status, I agree to notify the Office of Admissions in writing within 15 days of such change. I understand that I am financially and academically responsible for all classes that I will register or have registered for regardless of the outcome of this petition process.

Student Signature: _____ **Date:** _____

NOTARIAL ACKNOWLEDGEMENT: Form must be notarized if faxing, scanning, or mailing this form.

Subscribed and affirmed before me in the county of _____, state of _____, this ____ day of _____, 20__.

 Official signature of Notary Public

(SEAL)

 Commission expiration date

(Notary Seal must be visible on the copy)