

# FLORIDA **A&M** UNIVERSITY

UNDERGRADUATE ADMISSION APPLICATION

*Always.*  
Excellence With Caring.

Florida A&M University  
Office of Admissions  
444 Gamble Street  
Lucy Moten • Suite 203  
Tallahassee, Florida 32307-3200  
850.599.3796  
<http://www.famu.edu>

# Florida A&M University

## Undergraduate Admission Term Change

### ADMISSION APPLICATION PROCEDURES (Please read in full.)

This is the form you will use to apply for undergraduate admission to Florida A&M University. Florida A&M University encourages admission applications from qualified students regardless of color, race, religion, national origin, gender, disability, veteran status, or marital status.

We encourage you to submit your application online. You may do so by visiting our website at [www.famu.edu](http://www.famu.edu). Please be sure to type or print in black ink and to complete each item, as incomplete forms cannot be processed.

#### 1. Application Term Change for Admission

- Please attach your **\$15** cashier's check or money order (U.S. currency: do not send cash or personal checks), made payable to Florida A&M University. Your application will be returned if it is not included. This is a nonrefundable application fee.
- FAMU accepts ACT, SAT, or NACAC application fee waivers from Florida high school applicants ONLY.
- FAMU accepts NACAC application fee waivers from Non-Florida high school applicants ONLY.
- Applications for admission will not be processed more than one year in advance of the date for which entrance is sought.
- Answer all questions completely and accurately.
- Priority deadline dates for admission are as follows.

Fall Term .....	May 1 <sup>st</sup>
Spring Term .....	November 1 <sup>st</sup>
Summer Term .....	March 1 <sup>st</sup>

- Freshman applicants should submit two letters of recommendation from a high school teacher, counselor or principal.

#### 2. Official Transcripts

Transcripts must be sent to the Office of Admissions and Recruitment at the following address.

Florida A&M University, Office of Admissions, 444 Gamble Street, Lucy Moten • Suite 203, Tallahassee, Florida 32307-3200

Request that your current name and Social Security Number be added to the transcript if necessary. All transcripts and test scores become the sole property of the university.

- If you are a beginning freshman or transfer applicant with less than 60 semester hours of transferable academic credit, ask your high school to forward your official high school record.
- If you have attempted any coursework either as dual enrollment in high school or following high school, ask each school to forward an official transcript of your academic record. Transcripts must be mailed directly from the institution or forwarded electronically.
- Completers of high school by GED must provide an official copy of test scores (as well as a partial high school transcript).
- Transfer students who completed two years of the same foreign language in high school must submit official high school transcripts.

#### 3. Admission Test Scores

It is your responsibility to make the necessary arrangements to take the appropriate tests. Contact your school counseling office for more information.

- ACT or SAT with Writing included are required if you are seeking admission as a freshman or transfer with less than 60 semester hours of transferable academic credit. Have the official test scores forwarded directly to Florida A&M University by the testing agency.
- Applicants whose native language is not English may be required to take the Test of English as a Foreign Language (TOEFL) and have their scores submitted by the Educational Testing Service.

#### 4. Additional Information: Admission Consideration Based on Disability

- If you wish to request special admission consideration based on a disability, FAMU will consider this information within the following guidelines: (1) documentation regarding the disability will need to be provided on a voluntary basis, (2) all information will be kept confidential, (3) refusal to provide information will not subject the applicant to adverse treatment, and (4) information will only be used in connection with the university's voluntary efforts to overcome the effects of conditions that may have resulted in limited participation of persons with disabilities. See item 12, page 1. Applicants are not required to complete this item.

#### Below is a list of majors offered at Florida A&M University

Accounting	Civil Engineering	Graphic Design	/Instrumental	Technology Education
Actuarial Science	Computer Engineering	Health Care Management	Newspaper Journalism	Theatre
African-American Studies	Computer Information Systems	Health Information Management	Nursing	Veterinary Technology
Agriculture Science	Computer Science	Health	Pharmacy	
Agricultural Business	Construction Engineering	Science/Occupation	Philosophy	
Agronomy	Technology	Health Science/Pre-	Philosophy and Religion	
Animal Science	Criminal Justice	Physical Therapy	Physical Education	
Architectural Studies	Drama Education	History	Physics	
Architecture	Economics	Industrial Engineering	Physics Education	
Biochemistry	Electrical Engineering	Information Technology	Political Science	
Biological & Agricultural	Electronic Engineering	Interdisciplinary Studies	Political Science/Public	
System Engineering	Technology	Mathematical Science	Administration	
Biology	Elementary Education	Mathematics	Pre-Kindergarten Primary	
Biology Education	English	Mathematics Education	Education	
Broadcast Journalism	English Education	Mechanical Engineering	Pre-medicine	
Business Administration	Environmental Sciences	Molecular Cellular Biology	Psychology	
Cardiopulmonary Science	Entomology & Strctl Pest	Music/Choral, Voice	Public Relations	
Chemical Engineering	Control	Music/Instrumental	Religious Studies	
Chemistry	Facilities Management	Music Industry	Social Science/Political	
Chemistry Education	Fine Arts	Music Education/Choral	Science Education	
Chemistry/Pre-	Food Science	Music Education	Social Work	
medicine/Pre-Dentistry			Sociology	

**Type or Print in Black Ink**

1. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
U. S. Social Security Number

\_\_\_\_\_ FAMU Student ID Number

\_\_\_\_\_ Last Name      \_\_\_\_\_ First Name      \_\_\_\_\_ Middle Name      \_\_\_\_\_ Jr., III, etc.

2. For which term, in which year, do you seek admission?  
August \_\_\_\_\_ January \_\_\_\_\_  
May \_\_\_\_\_ June \_\_\_\_\_

3. This application is for enrollment as:  
 First time in college **freshman**  
 Undergraduate **transfer**  
 **Second** bachelor's degree

4. If your transcripts, test scores, etc. might arrive under any names(s) other than those listed above, enter here: \_\_\_\_\_

5. a. Nation of Citizenship: \_\_\_\_\_ b. Country of Birth: \_\_\_\_\_

6. Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

7. Type your permanent address. All correspondence will be mailed to this address.

Street Address \_\_\_\_\_ Apt. No \_\_\_\_\_  
City \_\_\_\_\_ County (or Province) \_\_\_\_\_ State/Nation \_\_\_\_\_  
( ) ( )  
Zip Code \_\_\_\_\_ Home Telephone Number \_\_\_\_\_  
( ) ( )  
Mobile Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_  
Email Address (required) \_\_\_\_\_

8.  Male  Female

9. Race/National origin (please check only one):  
 American Indian or Native Alaskan Asian  
 Asian or Pacific Islander  
 Black or African American  
 White (not of Hispanic origin)

If Hispanic or Latino, select ethnic group:  
 Hispanic  
 Hispanic/Latino

(Florida A&M University is a recipient of federal dollars and is required by the federal government to solicit certain demographic information to meet federal reporting requirements. Applicants are requested to provide this information voluntarily. This information will not be utilized in a discriminatory manner.)

10. In Case of an emergency, indicate the person you request the university contact:

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_  
Street Address \_\_\_\_\_ Apt. No \_\_\_\_\_  
City \_\_\_\_\_ State/Nation \_\_\_\_\_ Zip Code \_\_\_\_\_  
( ) ( )  
Home Telephone Number \_\_\_\_\_ Mobile Telephone Number \_\_\_\_\_  
Relationship:  Father  Mother  Legal Guardian  Other: \_\_\_\_\_  
Parent's Email Address (if available) \_\_\_\_\_

11. What is your planned major?

\_\_\_\_\_  
College/School?  
\_\_\_\_\_

12. If you wish to request special admission consideration based upon a disability, please check here. Applicants are not required to complete this item.

13. High School Graduation Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Year High School Name (Official transcript must be provided)

High School Code: \_\_\_\_\_  
(Ask your counselor for the 6-digit CEEB Number) City State/Nation

If High School was completed by GED, enter year \_\_\_\_\_  
(Official copy of test scores and partial high school transcript required)

Please list in chronological order every postsecondary institution (including dual enrollment) you have attended or will attend prior to entering this university. (You must include schools even if you did not complete a term.) Include Florida A&M University if you attended previously. For multi-campus institutions, indicate the specific campus. **Failure to list all institutions could result in your application being denied or your admission being rescinded. Use a separate sheet if necessary.**

School (Please do not abbreviate) City, State or Nation

Enter dates of attendance (including present enrollment) and degrees earned or expected before attending this university. Include Associate Degrees, certificates, or diplomas

Enter credit earned or expected from each institution attended.

Dates of Attendance				Degree	Date		Credit Hours	
From		To		Earned	Expected		Earned	Expected
Mo.	Yr.	Mo.	Yr.	Type	Mo.	Yr.	Number	Unit Sem./Qtr.

**Failure to answer these questions will delay processing of your application.**

15. If your answer to any of the following is yes, you must submit a full statement of relevant facts on a separate sheet attached to this form. You may be required to furnish the university with copies of all official documentation explaining the final disposition of the proceedings.
- a.  Yes  No Are you currently or have you ever been, charged with or subject to disciplinary action for scholastic or any other type of misconduct at any educational institution?
- b.  Yes  No Have you ever been charged with a violation of the law which resulted in, or, if still pending, could result in, probation, community service, a jail sentence, the revocation or suspension of your driver's license (including traffic violations which resulted in a fine of \$200 or more)?

*If your records have been expunged pursuant to applicable law, you are not required to answer yes to these questions. If you are unsure whether you should answer yes to 15a or 15b, we strongly suggest that you answer yes and fully disclose all incidents. By doing so, you can avoid any risk of disciplinary action or revocation of an offer of admission.*

16. If you have taken or plan to take any of the tests below, enter the month and year. Official records of all test scores must be provided directly from the testing agency.											17. Have you completed 2 years of the same foreign language?  <input type="checkbox"/> Yes <input type="checkbox"/> No  If yes, where? <input type="checkbox"/> High School <input type="checkbox"/> College  If yes, please submit appropriate official transcripts.	
	1 <sup>st</sup> Time		2 <sup>nd</sup> Time		3 <sup>rd</sup> Time		4 <sup>th</sup> Time		5 <sup>th</sup> Time			
Test	Mo.	Yr.	Mo.	Yr.	Mo.	Yr.	Mo.	Yr.	Mo.	Yr.		
ACT												
SAT												
TOEFL												
PERT												
CPT											<b>(College Placement Examination)</b>	

18. Present High School/College Enrollment

- a. If you are currently enrolled in a high school, college, or university, list all high school and college level courses which you are now taking or expect to complete before entering Florida A&M University. Use a separate sheet if necessary.
- b. If you are not currently enrolled and do not expect to complete any courses, check here.

Courses for Which You Are Now Enrolled					Courses You Expect to Complete Before Entering				
Name of Institution: _____					Name of Institution: _____				
Title of Course	Course No.	Date Course		Credit Hrs. (Sem./Qtr.)	Title of Course	Course No.	Date Course		Credit Hrs. (Sem./Qtr.)
		Mo.	Yrs				Mo.	Yr.	

19. For Non-U.S. Citizens Only:

City and Country of Birth \_\_\_\_\_

What VISA do you presently hold?  F1  F2  J1  J2  None  Other: \_\_\_\_\_ I-94 Expiration Date: \_\_\_ / \_\_\_

What VISA are you applying for:  F1  F2  J1  J2  None  Other: \_\_\_\_\_ Mo. Yr.

What institution issued your last I-20? \_\_\_\_\_ Did you attend?  Yes  No

If a permanent immigrant, enter the alien registration number shown on your I-551 form: \_\_\_\_\_ or you must provide a photocopy of your Alien Registration card.

20. Provide a history of your activities since leaving high school. List chronologically how you have spent or plan to spend your time prior to entering Florida A&M University (employment, military service, etc.). Use a separate sheet if necessary.

Activity	City, State or Nation	From		To	
		Mo.	Yr.	Mo.	Yr.

21. **Important.** You must read and sign the following section in order to complete your application.

I understand that this application is for admission and is valid only for the term indicated in item 2 on page 1. I also understand and agree that I will be bound by the university's regulations concerning application deadline dates and admission requirements. I further agree to the release of any transcript, student record, and test scores to this institution (including any SATI and ACT score reports that this institution may request from the College Board or ACT).

I certify that the information given in this application is complete and accurate, and I understand that to make false or fraudulent statements within this application or residence statement may result in disciplinary action, denial of admission and invalidation of credits or degrees earned. If admitted, I hereby agree to abide by the policies of the Board of Governors and the rules and regulations of Florida A&M University. Should any of the information I have given change prior to my enrollment, I shall immediately notify the Office of Admissions.

**I understand that the \$15 cashier's check or money order I submit with this application is a nonrefundable fee.**

Applicant's Signature (please type) \_\_\_\_\_ U.S. Social Security Number \_\_\_\_\_ Date \_\_\_\_\_

## Information for Residency Classification

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 residency in Florida for at least (12) consecutive months preceding the first day of classes of the term for which Florida residency is sought. Residence in Florida must be as a bona fide 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, a foreign national in a nonimmigrant visa classification that grants you the legal ability to establish a bona fide domicile in the United States, a permanent resident alien, or legal alien granted indefinite stay by the U.S. Citizenship and Immigration Services. Other persons not meeting the twelve-month legal residence requirements 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 pursuant to section 1009.21, Florida Statutes. 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. Students who depend upon out-of-state parents for support are presumed to be legal residents of the same state as their parents. Residency 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 or, in the case for dependent students, his or her parent has moved from another state.

**PLEASE TYPE OR PRINT if submitting hard copy.**

Name of Student: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Student is a:  U.S. Citizen  Non-U.S. Citizen  Permanent Resident  Other Date of Birth: \_\_\_\_\_

Alien Registration Number: \_\_\_\_\_ Issue Date: \_\_\_\_\_

**All non-U.S. citizen students are required to submit documentation of their legal status in the United States as issued by the United States Citizenship and Immigration Services office.**

### NON-FLORIDA RESIDENT

I do not qualify as a Florida resident for tuition purposes for the term for which this application is submitted. I understand that should I qualify for a future term, it will be necessary for me to submit an updated Residency Declaration while providing prescribed, supporting documentation to substantiate as "reclassification" of my status. Submission of this required document must occur prior to the beginning of the term for which residency is sought. I do not have to complete any further portion of this form except for the signing below.

Student Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Signature of Student: (Electronic or ink): \_\_\_\_\_ Date: \_\_\_\_\_

### TO BE COMPLETED BY THE STUDENT SEEKING FLORIDA RESIDENCY FOR TUITION PURPOSES:

I qualify as a **resident** for tuition purposes, as defined by s. 1009.21, Florida Statutes, for the term for which this application is submitted. I understand that it will be necessary for me to provide copies of the required documentation upon admission, in order to be considered as a Florida resident for tuition purposes. I have read the residency information on qualifying as a dependent or independent student, and declare that: *(select one of the options below):*

- I am a **dependent student**, as defined by s. 1009.21(1)(a), Florida Statutes, in that I am eligible to be claimed as a dependent under the federal income tax code by the claimant below. The claimant is my "parent" as defined by s. 1009.21(1)(f), Florida Statutes, (i.e., either or both parents of the student, any guardian of a student, or any person in a parental relationship to the student). My parent has maintained legal residence in Florida for at least the past 12 consecutive months. As defined by section 1009.21(1)(d), Florida Statutes, "legal resident" or "resident" means a person who has maintained his or her residence in this state for the preceding year, has purchased a home which is occupied by him or her as his or her residence, or has established a domicile in this state pursuant to s. 222.17." A copy of your parent's tax return may be requested to establish dependence.
- I am a **dependent student who has resided with an legal guardian or adult relative other than my parent**, and my legal guardian or adult relative has maintained legal residence in Florida for at least the past 12 consecutive months. **(Proof of Guardianship (required if claimant is NOT the student's parent: Documents showing Court appointed guardianship (power of attorney is NOT sufficient) or Five consecutive years of tax returns in which the student is claimed as a dependent by the claimant.)**
- I am an **independent person** who has maintained legal residence in Florida for at least the past 12 consecutive months. I provide 51% or more of my own support. An independent student generally includes a person who is at least 24 years old, married, a graduate or professional student, a veteran, a member of the armed forces, a ward of the court, or someone with legal dependents other than a spouse, pursuant to the United States Department of Education for the purposes of federal financial aid eligibility. There may be limited cases where a person under the age of 24 years old may qualify as an independent student. Such students will be required to verify independence *(including financial independence.)* A copy your tax return may be requested to establish independence.

### QUALIFICATION BY EXCEPTION *(to be completed by the student)*

As provided in s. 1009.21, Florida Statutes, I qualify for residency based on the following permitted exception (documentation required):

- A. I am a **qualified beneficiary** under the terms of the Florida Prepaid College Program (s. 1009.98, Florida Statutes.) **(Required: Copy of Florida Prepaid Recipient card.)**
- B. I am **married to a person** who has maintained legal residence in Florida for at least the past 12 consecutive months. I now have established legal residence and intend to make Florida my permanent home. **(Required: copy of marriage certificate and/or other documents required to establish residency.)**
- C. I was **previously enrolled at a Florida state postsecondary institution** and classified as a Florida resident for tuition purposes. I am **transferring** to another Florida state postsecondary institution within 12 months of the previous enrollment.
- D. I was **previously enrolled at a Florida state postsecondary institution** and classified as a Florida resident for tuition purposes. I abandoned my Florida domicile less than 12 months ago and am now **re-establishing Florida legal residence.**
- E. **Active duty members of the Armed Services of the United States** residing in this state and their spouses and dependent children, and active drilling members of the **Florida National Guard.** **(Required: Copy of military orders or DD2058 showing home of record.)**
- F. **Active duty members of the Armed Services of the United States** and their spouses and dependents attending a Florida College System institution or state university within 50 miles of the military establishment where they are stationed, if such military establishment is within a county contiguous to Florida. **(Required: Copy of military orders.)**
- G. United States citizens **living on the Isthmus of Panama**, who have completed 12 consecutive months of college work at the Florida State University Panama Canal Branch, and their spouses and dependent children. **(Required: Copy of marriage certificate or proof of dependency.)**
- H. Full-time instructional and administrative personnel **employed by state public schools and institutions of higher education** and their spouses and dependent children.
- I. Students from **Latin America and the Caribbean** who receive scholarships from the federal or state government. Any student classified pursuant to this paragraph shall attend, on a full-time basis, a Florida institution of higher education. **(Required: proof of scholarship and Latin America or Caribbean residency.)**

- J. **Southern Regional Education Board's Academic Common Market** graduate students attending Florida's state universities. **(Required: Certification letter from State Academic Common Market Coordinator.)**
- K. **Full-time employees of state agencies or political subdivisions of the state** when the student fees are paid by the state agency or political subdivision for the purpose of job-related law enforcement or corrections training.
- L. **McKnight Doctoral Fellows and Finalists** who are United States citizens. **(Required: Verification from graduate studies.)**
- M. United States citizens **living outside the United States** who are teaching at a Department of Defense Dependent School or in an American International School and who enroll in a graduate level education program which leads to a Florida teaching certificate.
- N. **Active duty members** of the **Canadian military** residing or stationed in this state under the North American Air Defense (NORAD) agreement, and their spouses and dependent children, attending a Florida College System institution or state university within 50 miles of the military establishment where they are stationed. **(Required: proof of active duty membership for specified purpose.)**
- O. **Active duty members of a foreign nation's military who are serving as liaison officers** and are residing or stationed in this state, and their spouses and dependent children, attending a Florida College System or state university within 50 miles of the military establishment where the foreign liaison officer is stationed. **(Required: proof of active duty membership for specified purpose.)**

**TO BE COMPLETED BY THE CLAIMANT/PERSON CLAIMING FL RESIDENCY:**

**NOTE:** If the student is a **dependent**, the parent is the claimant and will complete this section and provide supporting documentation. If the student is **independent**, the student is the claimant and will complete this section and provide supporting documentation. No single document shall be conclusive in establishing residency. Additional documentation, other than what is prescribed, may be requested in some cases. All documentation provided is subject to verification. Evidence of ties to another state may result in denial of Florida residency for tuition purposes.

Claimant/Name of Person Claiming FL Residency: \_\_\_\_\_  
 Claimant's Relationship to Student: \_\_\_\_\_  
 Claimant's Address: \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_

Date Claimant began establishing legal FL residence: \_\_\_\_/\_\_\_\_/\_\_\_\_ Issue Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Alien Registration Number: \_\_\_\_\_

**All non-U.S. citizen are required to submit documentation of their legal status in the United States as issued by the United States Citizenship and Immigration Services office.**

**PROVISION OF DOCUMENTS TO SUPPORT CLAIM OF FLORIDA RESIDENCY**

Per s. 1009.21(3)(c), Florida Statutes, the residency determination must be documented by the submission of written or electronic verification that includes two or more of the documents identified below. No single piece of evidence shall be conclusive.

**A. Claimant must provide at least two of the following of his/her personal documentation:**

- Florida voter's registration card Number: \_\_\_\_\_ Issue Date: \_\_\_\_/\_\_\_\_/\_\_\_\_
- Florida driver's license. Number: \_\_\_\_\_ Original Issue Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Current Issue Date: \_\_\_\_/\_\_\_\_/\_\_\_\_
- State of Florida identification card. Number: \_\_\_\_\_ Original Issue Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Current Issue Date: \_\_\_\_/\_\_\_\_/\_\_\_\_
- Florida vehicle registration. Number: \_\_\_\_\_ Original Issue Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Current Issue Date: \_\_\_\_/\_\_\_\_/\_\_\_\_
- Proof of permanent home in Florida occupied as primary residence for 12 consecutive months prior to the student's enrollment. **(Required: document such as a deed or other evidence of title to property used as primary residence, a homeowner's policy, a title insurance policy, evidence of a property tax payment on the primary residence, or a lease of multiple years' duration.)**
- Proof of a homestead exemption in Florida. **(Required: document from the county tax collector demonstrating the application of a homestead exemption to the claimant's primary residence.)**
- Official transcripts from a Florida high school for multiple years (2 or more years), if the Florida high school diploma or GED® was earned within the last 12 months.  
 Dates of Attendance: \_\_\_\_\_ Graduation Date: \_\_\_\_/\_\_\_\_/\_\_\_\_. **(Required: transcript)**
- Proof of permanent full-time employment in Florida for at least 30 hours per week for a 12-month period. **(Required: pay stubs or W-2 form for past 12 consecutive months)**

**B. Claimant may provide one or more documents from the following categories to demonstrate residency in Florida**

*(to be used in conjunction with one document from above):*

- Declaration of domicile in Florida
- Florida professional or occupational license
- Florida incorporation
- Document evidencing family ties in Florida
- Proof of membership in a Florida-based charitable or professional organization
- Any other documentation that supports your request for resident status, including, but not limited to, utility bills **(required: proof of 12 consecutive months of payments)**; a lease agreement **(required: proof of 12 consecutive months of payments)**; or an official state, federal, or court document evidencing legal ties to Florida.

**RESIDENCY DECLARATION:**

I, the undersigned, hereby declare that I have read the foregoing document and that the facts stated in it are true and further affirm the authenticity of the information provided on all pages of this Residency Declaration. I understand that any false or misleading information on this Residency Declaration, or provided in support of this Residency Declaration, will subject me to penalties pursuant to section 837.06, Florida Statutes, for making a false statement. I give permission for the institution to review or examine any and all documents and records, including those accessible electronically, which may assist in support of my status as a Florida resident for tuition purposes.

Student Name (Please Print): \_\_\_\_\_

Claimant Name (if not the Student): \_\_\_\_\_

Signature of Claimant (Electronic or ink): \_\_\_\_\_ Date: \_\_\_\_\_