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# The University of Tennessee at CHATTANOOGA

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## Application for In-State Classification Effective Semester: \_\_\_\_\_

Please select which office you are submitting your residency appeal to:

**Undergraduate:** \_\_\_\_\_ **Graduate:** \_\_\_\_\_

*Return to:*

**Undergraduate Admissions**  
University Center, 101  
Dept. 5105  
615 McCallie Avenue  
Chattanooga, TN 37403  
(423) 425-4157 (fax)

**The Graduate School**  
103 Race Hall  
Dept. 5305  
615 McCallie Avenue  
Chattanooga, TN 37403  
(423) 425-5223 (fax)

In accordance with the rules adopted by both the Board of Trustees of The University of Tennessee and the board of Regents, individuals domiciled in the State of Tennessee are classified as in-state residents. All individuals not having a domicile in Tennessee are classified as out-of-state. In determining whether a student is domiciled in Tennessee all pertinent evidence is considered by the University. Presence or absence of any particular item(s) of evidence will not automatically result in an in-state or out-of-state classification.

In order that we may have full information with which to determine your classification for admission and fee purposes, please complete and return this application to the above address. You should attach supportive materials (letters, photocopies of documents, etc.), particularly at the places marked "Documentation."

All decisions regarding classification for fee and admission purposes are made in accordance with Regulations for Classifying Students In-state and Out-of-state for the Purpose of Paying College or University Fees and Tuition and for Admission Purposes. (Copy available in each of the campus offices of Admissions and Records).

**1720-1-1-.08 EFFECTIVE DATE FOR RECLASSIFICATION.** If a student classified out-of-state applies for in-state classification and is subsequently so classified his or her in-state classification shall be effective as of the date on which reclassification was sought. However, out-of-state tuition will be charged for any semester during which reclassification is sought and obtained unless application for reclassification is made to the classification officer on or before the last day of regular registration of that semester.

Summer Long Term 2023: May 23, 2023  
Summer Part of Term I 2023: May 19, 2023  
Summer Part of Term II 2023: June 30, 2023

Fall Semester 2023: August 25, 2023  
Fall Part of Term I 2023: August 23, 2023  
Fall Part of Term II: October 12, 2023

Spring Semester 2024: January 10, 2024  
Spring Part of Term I 2024: January 10, 2024  
Spring Part of Term II 2024: February 29, 2024

Summer Semester 2024: May 17, 2024  
Summer Part of Term I: May 17, 2024  
Summer Part of Term II: June 28, 2024

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*Please type or print legibly in black ink.*

### PERSONAL INFORMATION

1. Name \_\_\_\_\_  
(Last Name) (First Name) (Middle Name)

2. Student Identification Number (UTC ID#) \_\_\_\_\_

3. Present Address \_\_\_\_\_  
(Street & Number) (City) (State) (Zip Code)

4. Permanent Address \_\_\_\_\_  
(Street & Number) (City) (State) (Zip Code)

5. Telephone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_

6. Date of Birth \_\_\_\_\_  
(Month) (Day) (Year)

7. Place of Birth \_\_\_\_\_  
(City) (State)

8. Have you been domiciled\* in Tennessee continuously since birth? Yes \_\_\_ No \_\_\_  
If no, date you began your most recent domicile in Tennessee? \_\_\_\_\_  
Address at time you began your most recent domicile

\_\_\_\_\_  
(Street & Number) (City) (State) (Zip Code)

What is the reason for coming to Tennessee to establish your most recent domicile?

\_\_\_\_\_  
\_\_\_\_\_

9. High School(s) attended \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
(Name) (City) (State) (Dates of Attendance)

\_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
(Name) (City) (State) (Dates of Attendance)

10. All colleges and universities attended (other than The University of Tennessee)

\_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
(Name) (City) (State) (Dates of Attendance)

\_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
(Name) (City) (State) (Dates of Attendance)

\_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
(Name) (City) (State) (Dates of Attendance)

\_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
(Name) (City) (State) (Dates of Attendance)

(If more, attach separate sheet)

11. Have you previously attended the University of Tennessee?

Campus	Dates of Attendance
UT at Chattanooga	from _____ to _____
UT Center for the Health Sciences	from _____ to _____
UT at Knoxville	from _____ to _____
UT at Martin	from _____ to _____

12. Have you ever been classified as an in-state resident by a state-aided institution in Tennessee? Yes \_\_\_ No \_\_\_ If yes, please give details \_\_\_\_\_  
\_\_\_\_\_

## CITIZENSHIP

13. The Tennessee Eligibility Verification for Entitlements Act requires an applicant for in-state tuition or state financial aid complete and sign the following statement:

I \_\_\_\_\_, swear or affirm under penalty of perjury under the laws of the state of Tennessee that: (check one)

\_\_\_\_\_ I am a United States citizen; or  
\_\_\_\_\_ I am an alien lawfully present in the United States

I understand that this statement is required by Tennessee law because I have applied for a public benefit. I understand that Tennessee law requires me to provide documentation verifying the status indicated above prior to receipt of this public benefit. I understand that knowingly and willfully making a false, fictitious, or fraudulent statement or representation shall subject me to liability under the Tennessee False Claims Act Tennessee Code Annotated 4-18-101 et seq. I understand that if I am found to have made a false or misleading statement my admissions may be rescinded or I may be disciplined by The University of Tennessee at Chattanooga.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

14. Are you registered to vote? Yes \_\_\_ No \_\_\_ If yes, what state are you registered? \_\_\_\_\_

15. Have you filed state or federal income tax form for the previous year? Yes \_\_\_ No \_\_\_ If yes, what address was given as residence? \_\_\_\_\_  
(Street & Number)

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Zip Code)

(Documentation: Photocopy of address section of form(s).)

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**EMPLOYMENT** (Documentation: Letter from employer which verifies the below information.)

16. Are you presently employed? Yes \_\_\_ No \_\_\_ If yes, employer's name \_\_\_\_\_  
Employer's address \_\_\_\_\_  
Date of Employment \_\_\_\_\_ Job Title \_\_\_\_\_  
Hours worked per week \_\_\_\_\_ If appropriate, percentage of on-the-job time is spent out-of-state? \_\_\_\_\_

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## FINANCIAL SUPPORT

17. List every source from which you received more than approximately ten percent (10 %) of your support or income during the past twelve months? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**MARITAL**

18. Married \_\_\_ Single \_\_\_ If married, spouse's name \_\_\_\_\_  
(Last) (First) (Middle)
19. Has spouse been domiciled in Tennessee continuously since birth? Yes \_\_\_ No \_\_\_ If no, when did spouse begin his/her most recent domicile in Tennessee?  
\_\_\_\_\_  
(Month/Year)  
For what reasons did spouse come to Tennessee to establish most recent domicile? \_\_\_\_\_  
\_\_\_\_\_
20. Is spouse employed full-time? Yes \_\_\_ No \_\_\_ How long in present position? \_\_\_\_\_
21. Is spouse's employment in Tennessee? Yes \_\_\_ No \_\_\_ Employers name \_\_\_\_\_

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**PARENTAL INFORMATION**

22. Father's name \_\_\_\_\_  
(Last Name) (First Name) (Middle Name)
23. Father's address \_\_\_\_\_  
(Street & Number) (City) (State) (Zip Code)
24. Mother's name \_\_\_\_\_  
(Last Name) (First Name) (Middle Name)
25. Mother's address \_\_\_\_\_  
(Street & Number) (City) (State) (Zip Code)
26. Do you have a legally appointed guardian? Yes \_\_\_ No \_\_\_  
If yes, guardian's name \_\_\_\_\_  
(Last Name) (First Name) (Middle Name)
27. Guardian's address \_\_\_\_\_  
(Street & Number) (City) (State) (Zip Code)
28. If your parent(s) or guardian is not presently domiciled in Tennessee, has he/she previously been domiciled in Tennessee? Yes \_\_\_ No \_\_\_ If yes, give previous Tennessee address  
\_\_\_\_\_  
(Street & Number) (City) (State) (Zip Code)  
Dates of previous domicile in Tennessee: from \_\_\_\_\_ to \_\_\_\_\_  
Reason for leaving \_\_\_\_\_
29. Did either parent or your guardian claim you as a dependant on his/her most recent income tax return? Yes \_\_\_ No \_\_\_  
(Documentation: Photocopy of address & dependent section of tax form.)

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**MILITARY**

30. Have you ever served in active military service? Yes \_\_\_ No \_\_\_  
If yes, state entered service \_\_\_\_\_ Date of entry into service \_\_\_\_\_  
State in which you were discharged \_\_\_\_\_ Date of discharge \_\_\_\_\_  
Home of Record as listed on D.D. form 214 \_\_\_\_\_  
(Documentation: Photocopy of D.D. Form 214)

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**AUTOMOBILE**

31. Do you have a driver's license? Yes \_\_\_ No \_\_\_ If yes, what state \_\_\_\_\_  
(Documentation: Photocopy of license)

32. Do you own an automobile? Yes \_\_\_ No \_\_\_ If yes, what state is it registered \_\_\_\_\_  
Automobile License Number \_\_\_\_\_  
(Documentation: Photocopy of auto registration)

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**REAL ESTATE**

33. Do you own the dwelling in which you live? Yes \_\_\_ No \_\_\_  
If yes, date of purchase \_\_\_\_\_  
(Documentation: Photocopy of bill of sale, lease/ mortgage papers, or other public record.)

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**OTHER IN-STATE CLASSIFICATION**

34. Have you ever been classified, for tuition or fee purposes, as an in-state resident of any other state? Yes \_\_\_ No \_\_\_ If yes, date classification was made and by whom \_\_\_\_\_  
\_\_\_\_\_

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**OTHER INFORMATION**

35. Provide any further information in which you wish to offer in support of your application \_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**TO BE COMPLETED BY ALL APPLICANTS**

My signature below is to certify to the correctness and completeness of the information supplied. It further indicates that I understand that the University of Tennessee may contact any of the persons referred to above for the purpose of obtaining additional pertinent information, and that I further understand that any false information provided in the foregoing statements will disqualify me from being considered an in-state student for fee and admission purposes and I may be required to withdraw from the University of Tennessee.

Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

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**Please do not write below this line**

Determination: Resident \_\_\_\_\_ Non-Resident \_\_\_\_\_

By: \_\_\_\_\_

(Name)

(Date)

Special Conditions: \_\_\_\_\_

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