



West Valley College RESIDENCY RECLASSIFICATION APPLICATION

Fax: (408) 741-4627
A&R Office: (408) 741-2001

Office Use Only			
Approved <input type="checkbox"/>	Denied <input type="checkbox"/>	Change Code: From _____ To _____	By _____ Date ____/____/____
Comments _____			

Request Reclassification for _____ Term _____ Year _____ WVC College ID # _____

Name _____ Last _____ First _____ MI _____ Birth Date _____

Student's Address _____ Street _____ Apt _____

_____ City _____ State _____ ZIP _____

Daytime Phone (_____) _____ Email Address _____

All documentation must be dated at least one year and one day prior to the start date of the semester.

To establish residency, you are required to be a US citizen, a permanent resident, an applicant for permanent resident status, or possess a visa that allows you to establish residency.

When did your present stay in California begin? _____ / _____ / _____
Month Day Year

US Citizen Y N

Students under 19yrs – Parent Documentation is required
Parent Info.
When did your present stay in California begin? _____
US Citizen: Y _____ N _____
If NO, Permanent Resident # or VISA Type / Issue date: _____

If NO, Permanent Resident # or VISA Type _____ Issue Date _____

It is the burden of the student to demonstrate clearly both physical presence in California and intent to establish California residency.

You must submit a minimum of two documents (from the list below) proving residency to the Admissions Office.

Student Documentation Only - If student is under 19 years old, parent documentation is required.

<u>Student</u>	OR	<u>Parent</u>	<u>Issue Date</u>	
<input type="checkbox"/>		<input type="checkbox"/>	_____	California Driver's License/California ID
<input type="checkbox"/>		<input type="checkbox"/>	_____	Ownership of residential property or rental / lease agreement in California
<input type="checkbox"/>		<input type="checkbox"/>	_____	Active California bank account
<input type="checkbox"/>		<input type="checkbox"/>	_____	Voter registration and proof of voting in California
<input type="checkbox"/>		<input type="checkbox"/>	_____	License from California for professional practice
<input type="checkbox"/>		<input type="checkbox"/>	_____	Previous two years of federal income taxes showing California as home address
<input type="checkbox"/>		<input type="checkbox"/>	_____	Previous two years of California state income tax as a resident
<input type="checkbox"/>		<input type="checkbox"/>	_____	Possession of California motor vehicle registration
<input type="checkbox"/>		<input type="checkbox"/>	_____	Maintenance of permanent military address or home of record
<input type="checkbox"/>		<input type="checkbox"/>	_____	Record of petition for a divorce in California
<input type="checkbox"/>		<input type="checkbox"/>	_____	Recipient of California State services
<input type="checkbox"/>		<input type="checkbox"/>	_____	Other qualifying information _____

I declare under penalty of perjury under the laws of the state of California the information and documentation submitted in connection with the determination of my residency are true, complete and accurate. I understand that so long as I am a student of the West Valley-Mission Community College District, I will advise the Admissions and Records Office of any changes to my status of residence. Further, I understand falsification, withholding pertinent data or failure to report changes in residence may result in legal action.

Student Signature _____ Date _____

Parent Signature _____ Date _____

Required only if student is under 19