

Tuition Residency Application for Active Duty Military and their Spouses/Dependents

Student information		
Name (last, first, middle initial)	Birth date	Student ID number
Permanent Home Address (street, city, state, ZIP code)		Phone
Rhode Island Address (street, city, state, ZIP code) <i>if applicable</i>		
Email Address	Date of first enrollment at URI	

Requesting In-State Tuition Effective:

 Fall

Year

 Spring

Undergraduate Student

Graduate Student

Other

Check the one that applies:

I am a member of the US Armed Forces (as defined in section 101 of title 10 of the United States Code) who has been on active duty for more than 30 days, or was injured while on active duty, which resulted in the term of active duty to be less than 30 days.

I am the spouse or dependent of a member of the US Armed Forces who has been on active duty for more than 30 days. Please print the name of the active duty service member:

I am the spouse or dependent of a member of the US Armed Forces who was injured while on active duty, which resulted in the term of active duty to be less than 30 days. I am currently living in Rhode Island, and will continue to reside in Rhode Island while attending the University of Rhode Island. Please print the name of the active duty service member:

Please submit all documentation that applies to you, along with the notarized application.

Military Service Orders showing active duty assignment/status

Copy of a government issued photo identification card or license for the Active Duty member

Copy of a government issued photo identification card or license for the Active Duty member's spouse or dependent (if applicable)

Proof of RI domicile (i.e., rental agreement, lease, proof of home ownership) for the Active Duty member's spouse or dependent (if applicable)

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Certification

I certify that the information in support of this application is true and correct.

Signature: (to be signed in presence of Notary Public)

Printed Name:

Notarization: To be completed by Notary Public. Subscribed and sworn to before me this

_____ day of _____, 201__

Notary Public:

My commission expires:

Note: Section 11-18-1 of the General Laws of Rhode Island provides severe penalties for giving a false document to a public official.

Return the completed application and supporting documents to the appropriate office below.

Undergraduate Kingston campus students who have been admitted to URI or are in their first semester of enrollment: University of Rhode Island Residency Officer, Undergraduate Admission, Newman Hall, 14 Upper College Road, Kingston, RI 02881-1322

Undergraduate Kingston campus students who are in their second (or more) semester of enrollment, and non-degree seeking undergraduate students: University of Rhode Island Residency Officer, Enrollment Services, Green Hall, Kingston, RI 02881

College of Continuing Education (CCE) students: University of Rhode Island, Feinstein Providence Campus, Admissions Office, Room 245, 80 Washington St, Providence, RI 02903

Graduate Students: University of Rhode Island Graduate School, Quinn Hall Room 204, 55 Lower College Road, Kingston, RI 02881