Idaho Residency Determination Form

North Idaho College

Please read all instructions, complete the entire form, and attach copies of all documentation.

Please print clearly using pen and answer each question. Incomplete or illegible forms will not be considered. Falsification or intentionally providing erroneous information is subject to penalty of perjury under the laws of the State of Idaho. All information will be kept confidential in accordance with the Family Education Rights and Privacy Act (FERPA) of 1974.

Qualifications for residency must be met prior to the first day of the term for which reclassification is sought. This worksheet and all required documentation must be submitted by the 10th business day of the Fall/Spring terms or 5th business day of the Summer term in which reclassification is sought. Failure to provide correct required documentation with the worksheet will result in a denial of residency being requested. All documents must be in the student's or parent/guardian's or spouse's name (no mix), show the physical address, and be dated. See www.NIC.edu/residency for more information. International students are not eligible for a residency change and must remain at international status and tuition rate while at NIC.

Email this completed form and all supporting documents to Admit@nic.edu or drop off at Cardinal Central in Lee-Kildow Hall. Communications for questions or regarding the decision will be sent to the student's Cardinal Mail account. NIC may request additional documents in order to determine a student, spouse or parent/guardian's residency.

(A) STUDENT INFORMATION SECTION

Term for which residency is sought: _____

What is your current residency status?	What residency is being sought?	If you are not a US citizen, you must provide proof of lawful presence in the US to qualify for Idaho residency for tuition purposes. Idaho code 67-7903	
☐ Idaho/not Kootenai County ☐ Washington ☐ Out-of-State	☐ Idaho/Kootenai County (District) ☐ Idaho/not Kootenai County (Non-District)	Student's Country of Citizenship:	Date moved to Idaho:
Name (Last, First, MI)		Student ID#:	
Current Address (Street, Apt #)		Phone number:	
City, State , Zip		Email:	
Name of high school graduated from: _____ City/State of high school: _____			Month/Year graduated:

(B) Select either DEPENDENT or INDEPENDENT

☐ **DEPENDENT**	One or more of my parents or court appointed legal guardians provides at least 50% of my financial support *AND* has maintained domicile in Idaho for at least 12 months prior to the start of the semester for which I am seeking reclassification.	Your parent/guardian must complete Section C (1 or 2) of this form and submit: 1. Proof of maintaining an Idaho domicile 2. Copies of supporting documentation in their name/address 3. True and correct copy of their latest Idaho tax return listing you as a dependent as proof of support. The extent of the disclosure required concerning the parent/guardian's state return is limited to the listing of dependents claimed and the signature of the taxpayer and shall not require disclosure of financial information contained in the returns).
☐ **INDEPENDENT**	I receive less than 50% of my support from a parent/guardian, *AND* have continuously resided and maintained a bona fide domicile in Idaho primarily for the purposes other than education for at least 12 months prior to the start of the semester sought.	You or your spouse must (1) complete Section C (1 or 2) of this form , (2) provide all required supporting documentation, and (3) provide a copy of your marriage certificate if you are claiming residency based on your spouse's residency.

Form last updated 6/30/26 CBS

(C) RESIDENCY - Complete either Section 1 or Section 2

Instructions: If you marked DEPENDENT in Section B, your parent/guardian must complete this section. If you marked INDEPENDENT in Section B, you or your spouse, if you are claiming residency through your spouse, must complete this section. Do not leave any questions blank. You must be able to show you have lived in Idaho continuously for at least 12 months prior to the start of the semester.

This section is being completed by: _____ **Relationship to student:** _____

SECTION 1: You must provide all 3 of the documents on the right. If unable to, complete Section 2.	A. ☐ Current unexpired Idaho drivers license or Idaho state ID and B. ☐ Latest Idaho State Tax return Form 40. (W-2s and Form 43 Part-time residents are not accepted) and C. ☐ Proof of Kootenai County home ownership as your primary domicile, purchased at least 1 year prior to the start of the term. Date purchased: _____

SECTION 2: You must provide the document in A below plus 4 other documents. All documentation must show the name of the student, or parent/guardian, or spouse (no mix of names), show the Idaho physical address, and be dated. The documents must be varied in type and dates. 1 document must be dated 12-13 months prior to term start date, 1 recent, and the remaining 2 dated between 3 and 9 months ago.

A. REQUIRED: Current unexpired Idaho drivers license or state ID	☐ Yes	Required: Attach a copy of your ID
B. Do you own a car, boat, RV, or trailer, registered in Idaho?	☐ Yes ☐ No	Attach a copy of your registration (not title)
C. Are you registered to vote in Idaho?	☐ Yes ☐ No	Attach a copy of your voter registration.
D. Do you rent or own a home in Kootenai County?	☐ Yes ☐ No	Attach a copy of your lease agreement/closing document.
E. Do you have an Idaho bank account?	☐ Yes ☐ No	Attach a copy of your bank statement.
F. Did you file Idaho taxes Form 40 or Form 43?	☐ Yes ☐ No	Attach a copy of your latest Idaho tax return, signed.
G. Other documents? (Ex: utility bill, paystub, cell phone, etc.)	☐ Yes ☐ No	Attach copy of documents.

(D) STUDENT'S SWORN STATEMENT

By signing this form, I indicate that all statements set forth in this application are true to the best of my knowledge and belief and derived from documents submitted with this application. I also indicate that, if selecting the Independent box, I have not been and will not be claimed as an exemption for income tax purposes by any person except myself or my spouse for the current and prior calendar year, and have not received and will not receive financial assistance in cash or in kind of any amount greater to the amount that would qualify me to be claimed as an exemption for income tax purposes by any person except myself or my spouse during the current or prior calendar year. I also indicate that, if selecting the DEPENDENT box, I have received at least 50% of my support from an Idaho resident that has claimed me as a dependent on his/her Idaho State Tax return for tax purposes. I understand that my residency is based on the documentation attached to this form provided by me, my spouse, or my parent/guardian.

Student signature: _____ Date: _____

FOR NIC USE ONLY Documents submitted:

Current Idaho drivers license: Yes ☐ Date: _____

Document dated 12-13 mos ago: _____ Date: _____

Document dated 1-2 mos ago: _____ Date: _____

Document dated 3-9 mos ago: _____ Date: _____

Document dated 3-9 mos ago: _____ Date: _____

Decision:

☐ Approved. Term effective: _____

☐ Denied

☐ Missing info

Update: ASUM NAE SPRO CRI Code Element label Rebill email

Completed by: _____

Date: _____