

PETITION FOR IN-DISTRICT TUITION CLASSIFICATION LUNA COMMUNITY COLLEGE

Please Print or Type

Instructions: Please answer all questions completely. If you need more space or wish to make a further statement, feel free to attach pages and clearly indicate the subject of each addition. Submit the petition to the LCC Office of Admissions well in advance of the term for which request is being made.

Complete Section I and III

If your current classification is Resident Out-of-State

Complete Section, I, II and III

If your current classification is Resident Out-of-District

SECTION I

Petitioner Name _____ SS # _____

Date of Birth _____ Telephone # _____

I am petitioning for **IN-DISTRICT** within the:

- Las Vegas City Schools Santa Rosa Consolidated Schools West Las Vegas Schools
- Maxwell Municipal Schools Sprinter Municipal Schools
- Mora Independent Schools Wagon Mound Public Schools

Fall Spring Summer Session 20_____

All requirements should be met by the first day of class (es). The deadline for submission of this petition is _____.

- Yes No 1. I have been living within the participating school district for a period of 12 consecutive months, prior to the term for which this petition is filed.

Section II

2. List all addresses where you (student) have resided in the last 24 months. Give inclusive month/year for each residence, including current residence and the reason you resided at that address. (For example, parent's home, school, employment, etc).

Month/Year

From / To

Present Address: _____
City _____ State _____ Zip _____ Reason _____

From / To

Present Address: _____
City _____ State _____ Zip _____ Reason _____

From / To

Present Address: _____
City _____ State _____ Zip _____ Reason _____

- 3 What address do you consider your permanent home? _____

4. List all employers' addresses, dates of employment in the previous 12 months.

Month/Year	Employment	City	State	Full-time Perm
From / To				
From / To				
From / To				

- Yes No 5. Are you currently enrolled, or have you attended, an institution of higher education in the last 24 months. * **If yes complete below.**

Year/Month	Institution	City/State	Classified a Resident?	
From / To			yes	no
From / To			yes	no
From / To			yes	no

- Yes No 6. Did you file a New Mexico personal income tax report in the immediate preceding year?
a. What state is currently withholding state income tax from your salary? _____

- Yes No 7. Did your parents or legal guardian claim you as a dependent on federal tax returns in the immediate preceding tax year?

If yes, who? parent's mother father guardian
If under the age of 23, a duplicate copy of pages one and four of the 1040, 1040EZ is required.

- Yes No 8. If you are less than 19 years of age or answered yes to question, 7, please provide the following information:

a. Parent/Guardian Name _____

Address _____

City/State/Zip _____

b. If parents' addresses differ, explain _____

9. Your driver's license number _____ State _____ Exp. Date _____

- Yes No 10. Do you own a motor vehicle? If yes, license number _____ State _____

- Yes No 11. Are you registered to vote in New Mexico? Voter registration number _____

12. List any other information, which may be pertinent to your classification as an In-District Resident for tuition purposes: _____

- Yes No 13. Are you receiving financial assistance from any other state other than New Mexico?

If yes, complete the following: Name of granting agency: _____
 State: _____ Date received: _____

- Yes No 14. Have you separated from the U.S. Armed Forces in the previous 24 months?

a. Home of record on original entry papers: _____

b. Home of record on separation papers (DD 214): _____

- Yes No 15. Are you a citizen of the United States? If no, complete this section:

Country of citizenship _____ Date of entry into United States _____

Type of visa _____ F-1, F-2 _____ J-1, J-2 _____ H-1, H-2 _____

Permanent Resident Alien Registration Number: _____

SECTION III

I certify that the above information is true and correct to the best of my knowledge; I am aware that Luna Community College may cancel my admission or registration for any false or misleading statement in this petition and assess retroactive tuition and fees.

Date _____

Signature _____

FOR OFFICIAL USE ONLY

____ Approved _____ Denied _____ Effective _____ Fall _____ Spring _____ Summer 20____

Reviewed by: _____ Date: _____

Notes: _____